

THE
XXTH CENTURY
PHYSICIAN
FOR EVERYONE

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MEDICAL ADVICE FOR THE EFFICIENT TREATMENT
OF THE MOST COMMON DISEASES, INCLUDING
THEir CAUSES AND PREVENTION

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THE
XXTH CENTURY
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FOR EVERYONE

MEDICAL ADVICE FOR THE SCIENTIFIC
TREATMENT OF THE MOST COMMON
CHRONIC MALADIES IN MEN,
WOMEN AND CHILDREN

BY

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TO THE READER.

If you value good health in yourself and those dear to you, if you wish for long life, read these pages attentively. If you suffer from mental depression or bodily ills, then do not miss a single line. You will speedily identify your malady, discern the cause of your trouble, realise the appalling danger of neglect or crude treatment, and finally learn the true and scientific mode of cure.

And when you have derived this knowledge, do not delay. Do not wait until the pain or discomfort has become unbearable. Remember that headache, lassitude, sleeplessness, palpitations, shortness of breath, loss of appetite, heartburn, flatulence, constipation, diarrhoea, abnormal discharges and urino-genital troubles, however slight, may be urgent warnings of serious, deep-seated mischief.

Whatever your station in life, you cannot afford to be ill. If you are young, consider how impaired health will handicap you in business, and the terrible responsibility it will add to your married life. If you have been successful in commerce or a profession, and enjoy the affection of a family, do not forget that death is ever at the threshold to rob you of all you possess.

Therefore, if you feel ill, do not try to struggle on, day after day, trusting that the trouble will right itself; nor be satisfied merely to patch yourself up by wholesale drugging with this or that "cure-all" patent medicine. Avoid the cheap doctor with little experience in your malady and, above all, the surgeon who immediately wants to operate.

If you lay your whole case before me fully and frankly, so that I can apply the scientific principles set forth below, I will cure you if it is at all possible, no matter where you live and no matter how many attempts at cure have proved futile. Let me have the details of your trouble, place your entire trust in me: and ere long (probably without losing a day's work) you, like thousands of others, will be restored to that condition in which you may again expect many years of life, in full possession of all your bodily and mental faculties.

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A WORD IN SEASON.

You, in common with nearly all adults, probably have some disease affecting one, or even more, of your vital organs. Maybe your heart, your large blood-vessels, your lungs, your spinal cord, your intestines, or, not least important of all, your kidneys or some other essential part of your urino-genital system, is diseased. You may say: "I don't feel ill," or even declare that you have "never known a day's illness in your life." Possibly not, in the sense that you have never had to stay in bed. But think the matter over, and you will, no doubt, begin to wonder whether you are really as healthy as you have always flattered yourself.

You will then have to admit to yourself that there is some, perhaps quite trifling, pain, discomfort or inconvenience, which makes itself felt from time to time. You have fits of depression or irritability; you do not sleep quite satisfactorily; you have a slight cough; your appetite or thirst is not normal; you are troubled with a little flatulence or heartburn; your head or back aches occasionally; or your urine shows an unusual sediment. These may have seemed to you but insignificant disturbances, not worth the attention of a busy man or woman. But let me warn you not to under-estimate their meaning.

Do not wait until one or other of these apparently trivial symptoms becomes more aggravating. For then—it may be too late. Remember that what you, or your inexperienced friends, consider only a temporary indisposition, not calling for medical attention, may be an indication of grave disease. Recognised in good time, and scientifically treated, your malady can be cured; neglected, it will certainly grow worse, and one day carry you off prematurely.

Most people who die between thirty and seventy might have seen their century. Just think of the many men and women whom you knew only a few years ago. Many of them, like yourself at present, seemed then in fair health; suddenly they broke down, never to get up again. Heart disease, paralysis, consumption, Bright's disease, diabetes and cancer, all begin

in this insidious way. Like yourself at present, those now dead, at one time imagined that there was nothing in particular wrong with them. Then in the hour of death came the misery of self-reproach for their careless neglect—alas, too late. Now that their inanimate bodies are crumbling to dust in the silent grave, no human art can bring them back to life and to their families.

DO NOT TREAT SYMPTOMS.

Above all, try to obtain a clear idea of the meaning which even trivial symptoms so frequently have. Do not imagine that *they* are *the real trouble*. They never are. Symptoms, such as depression of spirits, general debility, sleeplessness, loss of appetite, heartburn, flatulenco, nausea, vomiting, constipation, diarrhoea, coughs, palpitations and pains of any kind, noises in the ears, vertigo, specks before the eyes, frequent micturition, or abnormal discharges, have no independent existence. They merely accompany a disturbed state of affairs reigning somewhere in the body.

Therefore, if you wish to be thorough, as you should always be when your health is in question, and want to get rid of symptoms, you must deal with what has produced them. If lowspirited or disinclined for work, remember that such symptoms often precede serious maladies of the heart, brain, spinal cord, or sexual organs. If your nights are sleepless, remember that this is a symptom associated with maladies of the nervous system, heart, kidneys, or allied organs. If you have a cough, remember that coughs are due to trouble in the throat, lungs, or perhaps heart. And so with all other symptoms.

A watch which has stopped may often be set going again by rapping it sharply against the table; but no one imagines that such crude handling can really repair a defect in its delicate machinery. Accordingly, do not seek to suppress lassitude of mind or body by forcible doses of *strychnine*, *phosphorus*, and other so-called tonics; do not try to relieve sleeplessness by narcotics, such as *chloral* or *veronal*; do not stop a cough by drugging yourself with *opium* and *morphine*; do not attempt to cure constipation by *calomel*, or other dangerous drugs. For even if you succeed in getting rid of the debility, the sleeplessness, the cough, the constipation, and so forth, for a time, the trouble in your brain, or spinal cord, or heart, or lungs, or bowels, or kidneys, or elsewhere, will certainly not thereby be banished.

On the contrary, large doses of poisons, taken (with or without your doctor's sanction) for suppressing symptoms, are apt to work most powerfully against your ultimate recovery. For I shall

show you that symptoms, which you, in your blindness, regard as hostile manifestations of disease, are, in truth, part of your body's salutary efforts to throw off the disease within yourself. Symptoms of pain must, of course, be alleviated, and I myself do this constantly. But if you wage war brutally and indiscriminately against every abnormal sensation, and everything unusual in the functions and appearance of your body, you are foolishly doing your very best to thwart Nature's curative intentions.

YOU MUST TREAT THE DISEASE.

The onslaught of disease, your real foe, is, with rare exceptions, quite imperceptible. It is your custom to live well and eat freely. No trouble for years. Then you begin to ail. At first you disregard warning symptoms; but ultimately gout, or diabetes, or cancer, or Bright's disease is diagnosed. . . . It is your habit to partake generously of spirits or good cigars. No trouble for years. Then you begin to ail. At first you shut your eyes to warning symptoms; but finally your liver, or your kidneys, or your heart is found to be thoroughly diseased. . . . You keep late hours, or live a life of sensual pleasure. No trouble for years. Then you begin to ail. At first you take no account of warning symptoms; but in the end your heart, or your lungs, or your spinal cord proves to be the seat of serious disease.

Now, mark how the sequence of events is the same in nearly every case of grave malady. Excesses of food, spirits, tobacco, sensual pleasure, work or worry, introduce diseases into your body and, little by little, undermine the structure of vital organs. But you know nothing of it. Though diseases are already eating their way into the core of your being, you are unconscious of the horrors the future has in store for you and still revel in the joys of the moment. Then gradually symptoms arise. At first hardly perceptible, they grow in intensity, until appreciable discomfort or pain makes you—at last—realise that you are ill. So, you see, symptoms arrive often a long, long time after the disease has established itself within you—incontestable proof that the disease and the symptoms cannot be one and the same.

What, then, you ask, are symptoms? I will explain as simply as I can, and show you the important bearing their true understanding has on proper treatment. As I have just said, when disease first attacks the body, everything seems to go on much as usual for a time. There is nothing to attract your attention. But as your errors of life add to the disease, and the latter (as before, unnoticed by you) goes on injuring your organs, your body begins at last to grow uneasy, and rises in revolt

against the disease. It is when matters have reached this stage, and this struggle between your body and the disease commences, that you, for the first time, become conscious that something is wrong. In fact, you begin to observe symptoms, whether slight or severe. But it is not the destructive disease which you feel. What you are really becoming aware of is the fight between Nature and the disease within your body. What to you are signs of the disease, are in truth the blows of Nature's weapons *against* disease. And finally, as the struggle between Nature and disease grows in intensity, it is the symptoms resulting therefrom which force you to realise that you are ill indeed.

At first, no doubt, it will strike you as contrary to all preconceived ideas that symptoms (which are often inconvenient or even distressing) should be manifestations of Nature's good work in your interest. But, on second thoughts, you will find that it is only reasonable to expect, that when your body has been put out of order by errors of living, the way back to normal conditions should be somewhat troublesome. If you have unfortunately slipped half down the hill-side off the path, by and bye you must climb up again, and bear the tiredness and aching limbs, if you want to get to the top once more. You may, indeed, sit down for awhile, and so ease your tiredness in order to go on again; but if you lose sight entirely of your goal and, merely intent on forgetting your troubles, seek oblivion in intoxicants, you will never again reach the top—nay, by such carelessness you may even fall to the bottom and perish.

So it is in illness. Knowing now the true meaning of symptoms you may ask your physician to control and moderate such symptoms as give pain; but you must never demand that he shall forthwith suppress all your symptoms indiscriminately. For you understand now, that a certain minimum of inconvenience is inseparable from the process of a thorough cure. Ruthlessly to wipe out all symptoms, without any discrimination, means crushing at the outset every effort of Nature on your behalf. A scientific physician will do no such thing. He will watch symptoms as zealously as the mariner studies his chart. He will look to the symptoms for the direction which, from her countless years of experience, Nature has chosen as leading most surely to recovery and pilot his patient along this course to safety. . . . And if Art thus intelligently co-operates with Nature, can you doubt that every malady, however grave, however longstanding, must be curable?

HOMŒOPATHY CURES THE DISEASE.

Your obvious question now is: by what means is such co-operation between Art and Nature to be achieved? I reply: by

the system of medication and treatment known as Homœopathy. You may, perhaps, until now have heard no more than its name, or you may have been prejudiced against it by interested parties. Now you shall have an opportunity of learning what Homœopathy really is, and of forming your opinion from facts, as I did. When I devoted myself to Medicine, I was perfectly free to choose any method of treatment. But twenty years of study and research convinced me that the therapeutic method embodied in Homœopathy was absolutely the only one for curing disease radically and permanently. And if you know of a case of malady which was completely cured by a doctor professing other principles of treatment, then I say that that physician must have, unconsciously, proceeded on homœopathic lines, as hundreds of non-homœopaths daily do.

The first, and ruling, tenet of Homœopathy is that the physician should proceed against disease, never at haphazard, but always on the definite scientific principle: *Similia similibus curentur*. The literal translation of this maxim is: "Let like be cured by like"; but freely interpreted, it really stands for: Watch Nature and do likewise. And what does this signify? It means that the doctor must clearly realise that, in every sick body, Nature is perpetually striving to cure, that every sufferer's symptoms are, in fact, manifestations of Nature's curative efforts and not of the disease, and that, in order to expedite the cure, he must help Nature on her chosen path as indicated by the patient's symptoms. Consequently he must use such remedies as would be capable of evoking in an (until then) healthy body the very group of symptoms which his patient exhibits. For whatever is able to set certain forces to work, is obviously also capable of intensifying the energy of such forces if already roused. Therefore by using remedies selected with this idea, the physician will strengthen Nature's attempts at a cure and materially hasten the process begun by her.

Let me make my point still simpler. Assume you are attacked by a disease to which I shall refer as the Disease *N*. You have symptoms which we will call *a*, *b* and *c*, which are generally met with where the Disease *N* is suspected. As I have explained to you, symptoms are accompaniments of Nature's curative efforts, and the presence of *a*, *b* and *c* shows that Nature is already striving to expel the Disease *N*. If, without treatment, these symptoms *a*, *b* and *c* entirely disappear after a time, then you recognise that Nature unaided has overcome the Disease *N*, and re-installed rest and peace in the body. This often happens in *acute* maladies, which (such as a cold) go as quickly as they come. But if, on the contrary, the symptoms *a*, *b*

and *c* persist indefinitely, then you must conclude that Nature, in her struggle with the Disease *N*, is, for some reason, not exerting energy sufficient to overcome it. We then speak of the malady as being *chronic*.

But *chronic* does not necessarily mean incurable, as some hastily assume. For suppose your doctor knows of a certain remedy (I will name it remedy *X*), capable of arousing in a healthy individual the very symptoms *a*, *b* and *c*. Obviously, then, your doctor possesses in the remedy *X* a means not only of waking in your body curative forces similar to those already set to work by Nature against the Disease *N*, but also of strengthening the particular curative process already begun. Therefore, if he judiciously uses the remedy *X* on his patient, he will, ultimately, raise the intensity of Nature's curative action in the latter to such a pitch that it must conquer the Disease *N*. And when this is accomplished, the symptoms *a*, *b* and *c* (which, as you remember, merely accompany the body's curative efforts), necessarily vanish, in the case of a *chronic* no less than in that of an *acute* malady and you are well again. But you will now understand why, in homœopathic treatment, a slight, temporary increase in the symptoms is a sure indication that the right remedy has been applied.

But this scientific way of dealing with disease is not the sole recommendation of Homœopathy. Homœopathy, in addition, possesses a more extensive range of remedial agents than any other past or present system of Medicine. For homœopaths not only employ hundreds of medicaments of their own, but further press into service every known drug, whether derived from the Animal, Vegetable or Mineral Kingdom, whether a simple or a compound, whether a serum or any other of the most modern pharmaceutical preparations.* Moreover, homœopaths make use of many measures drawn from non-medicinal methods of treatment: from hydrotherapy, balneotherapy, electrotherapy, physiotherapy and dietetics, turning them into valu-

* Homœopathic medicaments are administered in three forms—viz., as Tinctures, Triturations, and Pilules.

TINCTURES are liquid preparations made by dissolving drugs in spirit of wine.

TRITURATIONS are fine powders prepared by intimately mixing such drugs as are insoluble with the required proportion of sugar of milk.

In each of these the active ingredient constitutes 1-10, 1-100, or 1-1,000 of the preparation, according to the degree of dilution or attenuation employed.

PILULES are often used in place of tinctures for greater convenience, and to insure accuracy of dosage. They are tiny pills which have been impregnated with the tincture and allowed to dry, and are, therefore, to be regarded as conveniently portable doses of tincture,

able weapons against disease. Can you name any other system of Medicine which has so imposing an armament at its command?

Lastly, homœopathic methods never entail the risk of aggravating the trouble, so often associated with other treatments. And it is, curiously enough, this invaluable feature of Homœopathy which lends itself most freely to misunderstanding and misrepresentation. I am referring to the small doses of medicine which Homœopathy advocates, and which cannot, under any conceivable circumstances, do harm. It is urged that, being so minute, they must also be ineffective for good. The uneducated will probably always cling to the superstition that a medicine, to be beneficial, must be given in sufficient quantity to shake the constitution to its foundations. But Science has now definitely established the fact that almost infinitesimal quantities of matter can produce far-reaching effects on the human body. As an example, you need only remember the enormous influence the imponderably small quantity of *iodine* secreted by your thyroid gland (situated in the front of your neck) has on your welfare. Let the *iodine* be absent for some reason, and you, to-day a powerful man, will to-morrow turn into a physical and mental wreck. This example alone should convince you that minute doses of a drug may have an almost incredible potency for good, if suitably selected.

HOMŒOPATHY CONDUCTS TO LONGEVITY.

If what I have said does not make my meaning quite clear to you, please do not hesitate to write and question me. I shall always be glad to give you further explanations. For I want every man and woman to understand that symptoms are not manifestations of the disease but, on the contrary, evidences of curative forces at work. If you once realise this, you will never again ask either a doctor or a chemist to give you something for merely suppressing your symptoms. You will resolutely refuse ever to submit to wholesale drugging, designed forcibly to obstruct Nature's beneficent action on your behalf; but will insist instead on safe and gentle measures, intelligently adapted to aiding Nature's curative forces in your body.

Thus, whenever you are ill, you have everything in your favour. And if you put your trust in Homœopathy, it will not only cure your disease, but certainly also prolong your life. For its remedies, without exception gentle and harmless, do not introduce fresh diseases by poisoning you under the guise of treatment, and do not tax your constitution by such violent measures as blistering, cupping, leeching, injections and caustics. And that the mild measures of Homœopathy conduce to

longevity, statistics amply prove. They show that 80, 90 and even 100 are ages by no means rare among the followers of Homœopathy. Dr. Hahnemann himself, the pioneer of Homœopathy, attained the age of 88; Dr. Quin, who introduced the system into England, lived to close on 80; while Lord Ebury, for years the acknowledged leader of English homœopaths, only died when 92. Indeed, this habitual longevity of homœopaths has received practical recognition from American Life Insurance Companies, which grant specially favourable terms to homœopaths.

In accepting Homœopathy, you will be in good company, for it may be said with truth, that for the last century the most educated and enlightened men and women of Europe and America, including a great number of illustrious personages, have been and still are ardent adherents of Homœopathy. England's great Prime Minister, Lord Beaconsfield, was a lifelong homœopath. So were the Duchess of Cambridge, Dr. Whately, Archbishop of Dublin, the Duke of Beaufort, the Marquess of Anglesey, Lord Cawdor, Lord Calthorpe, Lord Donoughmore, Lord Grimthorpe, Dr. Samuel Butler (Author of "Erewhon") and many others. Of living homœopaths in this country, only a few, such as the nonagenarian Earl of Wemyss, the Earl of Dysart, Sir G. Truscott (late Lord Mayor of London), Sir Robert Perks (the Nonconformist leader), Madame Patti (the world-famed singer) and Sir Mortimer Durand (the distinguished ambassador), need be named, in order that you may realise that many eminent persons in different walks of life have satisfied themselves of the benefits to be derived in illness from Homœopathy.

THE CAUSATION OF CHRONIC MALADIES.

Medical men divide maladies into two groups, *acute* and *chronic*. Sea-sickness, ptomaine-poisoning, and scarlet fever are examples of acute maladies. They, as you know, run a definite course and are soon over. For either Nature, by a powerful effort, quickly throws off the disease, or, if unable to stand the strain, the unfortunate sufferer succumbs. Neurasthenia, gout, and consumption belong to the group of chronic maladies. In these latter Nature is also trying to cure, but does not appear capable of making the one vigorous effort required for rapidly overcoming the disease, and, as it were, fritters away her energy in a multitude of unavailing attempts. Suffering, by which these attempts are usually accompanied, is accordingly prolonged indefinitely, unless Nature receives adequate assistance from medical art. You will now understand why your chronic trouble, which for so long you hoped would right itself without "doctoring," is still there, or has possibly become aggravated.

Chronic maladies are, as a general rule, the accumulated effects of a multitude of diseases. By disease I mean some actual damage inflicted on the body. Day by day vast numbers of disease-producing agents make their onslaught upon you, intent on doing injury: for everything that either affects the flesh or influences the mind may be such a source of damage. Unsuitable food or drink, occupations or habits, too much pleasure or worry, a fall or blow, microbes and other parasites, drastic drugs and operations, they all leave their evil impression on your system, and either lay the foundation of a chronic malady, or aggravate an already existing one. Thus, consumption of the lungs, for example, is the combined result of exposure or other damage and of the tubercle bacillus; gout follows too much alcohol, too much meat, and too much leisure. And you will, no doubt, be able to trace the same multiplicity of causes in your own malady.

I shall now refer briefly to the principal causes of chronic maladies.

CLIMATE AND ALTITUDE.

Heat, extreme or prolonged, has a deleterious effect on many organs, and leads to damage, chiefly in the brain,

blood vessels, and digestive organs. Chronic maladies most to be feared after prolonged exposure to great heat, whether natural or artificial, are neurasthenia, colitis, cirrhosis of the liver, arterio-sclerosis, varicocele, piles, and stone in the kidney.

Cold, accompanied by moisture, is not less injurious. It lowers the vitality of the tissues and renders them less able to cope with micro-organisms and other disease-producing agents. Spinal disease, diabetes, chronic neuritis, neuralgia, rheumatism and gout, eczema, mouth and throat troubles, bronchitis, consumption, cystitis and prostatitis, metritis and vaginitis are all apt to be produced in this way. Finally, Bright's disease and bronchitis occur with the greatest frequency where sudden alternations of heat and cold prevail. Such conditions are, unfortunately, inseparable from certain trades and occupations.

The pressure of the atmosphere (great in low countries and low in the mountains) is of more importance than many people recognise. Either extreme strains the heart and lungs, and chronic maladies may result from this abnormal state, if long continued.

DIET.

Habitual immoderate eating overworks and irritates the digestive organs, and imposes an intolerable strain on all organs concerned in getting rid of waste products, which, retained in the body, may poison every tissue. Among the consequences of continual overeating may be mentioned chronic gastritis and colitis, cirrhosis of the liver, arterio-sclerosis, piles, gout, and Bright's disease. Excess of meat, in particular, is a cause of arterio-sclerosis, gout, stone in the kidney or bladder, and Bright's disease. Too much sugar and starchy food is apt to induce diabetes and stone. The immoderate use of spices and condiments favours arterio-sclerosis, cirrhosis of the liver, and piles.

Too sparing a diet leads ultimately to a number of maladies, such as chronic bronchitis, consumption, hysteria, neuralgia, rheumatism, (poor man's) gout, vaginitis, varicose veins, and cancer.

NON-ALCOHOLIC BEVERAGES.

In the case of fluids, similarly, either too much or too little may be injurious. Too much, after a time, harms the heart and kidneys; too little unfavourably affects the bowels, and hinders the removal of waste material through the excreting organs.

Water, if hard and habitually drunk unboiled, is often the cause of early arterio-sclerosis, glandular troubles, and stone in the urinary passages. Frequent drinking of strong tea, particularly the kind imported from Ceylon, through its excess of tannin, damages the mucons lining of the intestinal wall. Coffee, especially if taken without plenty of milk, is one of the most powerful irritants of the brain and spinal cord. Cocoa contains a large proportion of fat, sugar, and starch. Hence its free use may lead to the troubles ascribed to overeating. Milk also is too rich in nourishment for some, already undermined, constitutions.

ALCOHOL.

There is no organ in the body which is not injured by alcohol, if strict moderation is exceeded. Disorganisation of function and degeneration of tissue follow inevitably, as can be seen from the following, far from exhaustive, list of chronic maladies which may often be traced to alcoholic excess: neurasthenia, hysteria, spinal disease, neuritis, diabetes, chronic gastritis, cirrhosis of the liver, heart disease, arterio-sclerosis, piles, gout, stomatitis, laryngitis, bronchitis, consumption, Bright's disease, stone in kidney or bladder, cystitis, prostatitis, urethritis, spermatorrhœa, impotence, sterility, and metritis. Certain alcoholic beverages, such as heavy beers (porter, stout, etc.) and wines (burgundy, port, etc.), also do harm by means of constituents other than alcohol. They contain large amounts of sugar and other substances, which produce the effects of overeating.

TOBACCO.

Tobacco, if indulged in to excess, may be one of the causes of maladies, such as neurasthenia, chronic gastritis, heart disease, arterio-sclerosis, cancer of the tongue, lip or cheek, stomatitis, tonsillitis, laryngitis, and impotence.

PHYSICAL EXERCISE.

Few probably realise how potent a cause of disease exercise may be, if carried beyond the individual's capacity. A certain amount of exercise is obviously necessary to health, but "physical culture," with its habitual excesses and abuses, is one of the most fertile and deadly disease-producing agents. The heart, brain and spinal cord are known to suffer most, but the lungs and other organs do not escape. In games and sports, mental excitement may be superadded to fatigue, with disastrous effects on the brain. Athletic pursuits, therefore, give rise to, or aggravate, a variety of chronic

maladies, such as neurasthenia, spinal disease, neuritis, gastritis, heart disease, arterio-sclerosis, varicose veins, varicocele, metritis, and vaginitis.

Disease may also be produced by excessive use of one particular organ or system: for example, the lungs in musicians who play wind instruments.

MENTAL FATIGUE, WORRY, &c.

Excessive mental work acts mainly, but not exclusively, on the brain and the nervous system. Among its baleful effects may be mentioned neurasthenia, hysteria, spinal disease, arterio-sclerosis, and impotence.

Worry, anxiety, grief and shock are mental phenomena which involve increased wear-and-tear of the delicate tissues of the brain, and, if prolonged, may injuriously affect every organ in the body. The following are some of the most likely consequences: neurasthenia, hysteria, Graves' disease, diabetes, gastritis, colitis, arterio-sclerosis, cancer, movable kidney, spermatorrhœa, impotence, metritis, and vaginitis.

Too little mental work involves gradual deterioration of the brain, which may end in imbecility.

SLEEP.

Insufficient or broken sleep, whatever its cause, is one of the most potent disease-producers. Among the maladies which may be induced or aggravated by habitual sleeplessness are neurasthenia, hysteria, Graves' disease, diabetes, arterio-sclerosis, and Bright's disease. The brain is most seriously injured, but all parts of the body share in the damage to a greater or less extent.

MICROBES AND OTHER PARASITES.

Acute infectious maladies, such as measles, scarlet fever, diphtheria, smallpox, chicken-pox, typhoid fever, typhus fever, erysipelas, pneumonia, pleurisy, rheumatic fever, mumps, whooping cough, cerebro-spinal fever, influenza and blood-poisoning, as well as malaria, yellow fever, and other tropical maladies, are due to infective micro-organisms. Many of these acute maladies, if carelessly treated, may leave behind damage to vital organs, such as the heart and kidneys, and so give rise to the chronic maladies mentioned in the following sections of this book.

Maladies of parasitic origin which commonly run a chronic course are mostly referred to elsewhere. The most important are tuberculosis, syphilis, urethritis (gonorrhœa), prostatitis, cystitis, metritis, vaginitis, vulvitis, scabies (itch), and intestinal worms.

SEXUAL INDULGENCE AND SECRET VICE.

To pass in silence over these unpleasant topics, which many writers do from false modesty, would leave the subject of the causation of chronic maladies incomplete. Unfortunately, from want of worldly experience, many physicians also ignore these points in dealing with patients, and, consequently, quite fail to realise their overwhelming importance as disease-producing agents. Indeed, it is no exaggeration to say that, in quite ninety per cent. of all chronic maladies, sexual errors have largely contributed to their production.

By sexual excess, especially if begun early, or habitual, the nervous system is wrecked, the brain and spinal cord suffering above all. Hence neurasthenia is so common a result of such indiscretion, but deadly spinal disease is also to be feared. The heart, too, is apt to receive irreparable injury, and the kidneys may be so much deranged that ultimately the malady known as Bright's disease follows. The genital organs themselves, particularly the prostate gland, often show signs of serious mischief; and, indeed, hardly any organ escapes entirely. Premature impotence, so frequently followed by suicide, is a common sequel of such deplorable excesses.

It is scarcely possible to overstate the disasters which may be inflicted on the body by the secret practices which children of both sexes learn, from precocious companions or immoral servants, more often than is generally admitted; and the idea that this matter may be dismissed as a bugbear, can only be held by those who have not seen the terrible consequences which almost invariably follow in after life. Factors which add greatly to the dangers of this habit are the youthfulness, in many cases, of the victim, and the frequency with which it may be practised without parents and others becoming aware of it. Moreover, the resultant remorse and self-reproach of the sufferer, who, in spite of good resolutions, is at times quite unable to control his pernicious inclinations, powerfully affect the mind. In conclusion, from my own observations, I do not hesitate to say that a state approaching insanity may supervene, if, in such cases, skilful treatment is not firmly and sympathetically applied.

DRASTIC TREATMENTS.

Perhaps the most unfortunate circumstance in the whole domain of Medicine is the extreme frequency with which so-called treatment, ostensibly aiming at cure, aggravates existing maladies and sets up others. It must be remem-

bered that every drug is a poison, and that, if given in large doses, as is the universal custom in orthodox practice, it must injure the body. Many of the drugs in the large class of *purgatives* irritate, and may irretrievably damage, the mucous lining of the bowel. *Mercury*, however given, and particularly in the form of *calomel*, is exceedingly harmful to the kidneys, nervous, and other tissues. *Arsenic* has a most destructive effect on the nerves, and also on the heart-muscle. *Iodide of potassium* causes bronchitis. *Bromide of potassium* undoubtedly injures the brain. The records of coroners' inquests abound in fatalities due to *veronal*, *chloral*, and other narcotics; while *hydrocyanic acid* is the most deadly poison known. *Salicylic acid* and its compounds (*salicylates*, *aspirin*, etc.) frequently give rise to chronic maladies of the kidneys or womb. *Nux vomica* and *strychnine* poison the spinal cord, and may occasion fatal convulsions. The vaunted heart tonics, *digitalis*, *strophanthus*, and *convallaria*, often do permanent mischief to the very organ they are supposed to benefit, as well as to the urinary system. And few can be ignorant of the profound physical and moral degradation that almost inevitably results from the continued use of *opium* and its derivatives.

But besides drugging, many other therapeutic measures are in daily use, the evil effects of which may be incalculable. Blistering, leeching, and cupping, though antiquated, still find favour with some physicians, in spite of the brutality and danger of such methods. Cauterisation of the nose impairs the functions of the air-passages. Boracic acid lotions may damage the delicate tissues of the eyes. The practice of washing out the stomach, bladder, and other cavities is not only most disagreeable to the patient, but also calculated to further the malevolent work of other noxious influences. Enemas, especially the deep ones prescribed in cases of intestinal worms, irritate and weaken the bowel, leading to piles, prolapse, and similar disasters. Drastic local treatment of the urethra and prostate gland, whether by injections, irrigation, catheters, sounds, bougies, or cauterisation, is the most prolific cause of stricture; and massage of the prostate is extremely objectionable and liable to lead to abscesses in that organ. Even more worthy of condemnation is the indiscriminate employment of sounds, specula, and similar instruments for merely diagnostic purposes, whereby enormous damage may be done. Lastly, surgical operations are nowadays often undertaken quite unnecessarily, and without consideration of the danger to life which they may involve. Especially is this the case in

operations for adenoids, varicose veins, piles, appendicitis, stone in the kidney or bladder, movable kidney, enlarged prostate, and fibroid tumours of the womb.

OCCUPATIONS.

There are two ways in which a person's occupation leads to chronic maladies. It may be harmful in itself, if it entails the handling of dangerous poisons, exposure to all weathers or to great artificial heat, heavy labour, or long hours. Or the conditions of the trade may be such as to favour injurious habits, such as intemperance, overeating, late hours, or immorality. The following is a list of occupations and the chronic maladies they are apt to lead to:—

Business men (stockbrokers, merchants, manufacturers):—neurasthenia, spinal disease, diabetes, gastritis, gout, piles, stone.

Clergymen and Lawyers:—neurasthenia, spinal disease, diabetes, gastritis, piles, laryngitis (clergyman's sore throat), spermatorrhœa, gont, stone, Bright's disease.

Actors, Soldiers and Sailors:—neurasthenia, spinal disease, rheumatism, arterio-sclerosis, varicose veins, varicocele, gout, syphilis, gonorrhœa.

Medical men:—neurasthenia, spinal disease, rheumatism, diabetes, gastritis.

Literary men and Artists:—neurasthenia, spinal disease, neuritis, diabetes, gastritis, gout, piles, stone, prostatitis, spermatorrhœa, impotence.

Commercial Travellers:—spinal disease, diabetes, gastritis, cirrhosis, piles, gout, stone, syphilis, gonorrhœa.

Publicans and Butchers:—diabetes, cirrhosis, arterio-sclerosis, piles, gout, Bright's disease, stone, spermatorrhœa, impotence.

Shop Assistants (male and female), Waiters, Waitresses, and Barmaids:—diabetes, arterio-sclerosis, varicose veins, piles, consumption, syphilis, gonorrhœa, gout, Bright's disease, stone, eczema, metritis, vaginitis.

Farmers and Agricultural Labourers:—spinal disease, neuritis, gastritis, heart disease, arterio-sclerosis, gout, laryngitis, Bright's disease, stone, cystitis, sterility.

Policemen and Hawkers:—rheumatism, bronchitis, varicose veins.

Athletes (jockeys, professional cricketers and footballers), Blacksmiths, Porters and Labourers:—neurasthenia, spinal disease, heart disease, arterio-sclerosis, eczema.

Carmen, Engine-drivers and Chauffeurs:—neurasthenia,

spinal disease, rheumatism, bronchitis, Bright's disease, stone, prostatitis.

Miners and Grinders:—bronchitis, consumption.

Stokers, Boiler-makers and Bakers:—eczema, Bright's disease, stone.

Weavers and Tailors:—neuritis, bronchitis, consumption.

Chimney-sweepers:—cancer of the genital organs.

Musicians:—neuritis, piles, bronchitis.

THE PRINCIPAL CHRONIC MALADIES.

Before giving you a description of the most common chronic maladies, I should like to warn you once more against confusing the symptoms you experience with the disease the medical man has to combat. Whatever abnormalities you may notice, be it pain, nervousness, depression, insomnia, constipation, or so forth, these are not the disease. The real trouble is always, as in any other machine that is not working satisfactorily, a derangement of one or more of your vital parts, and clinical experience must be combined with a knowledge of morbid anatomy, in order to ascertain the variety of mischief which has to be dealt with.

There is yet another point to be noted in this connection. The superficial observer imagines the trouble to be situated in that part of the body where the abnormality is noticed, but this is frequently very far from the truth. Where there is headache, for instance, the seat of the disease is only very rarely the spot where the pain is felt. The disease, to be sure, may be in the brain, but it is much more often in the spinal cord, the bowels, or the urino-genital organs. From this you will realise how important it is that you, or your physician, should, from a study of your symptoms, correctly locate the seat of the disease, if you are to apply treatment to that part of your body which requires it.

NEURASTHENIA.

[Nervous Debility.]

The group of symptoms known collectively as Neurasthenia not only entails much suffering and distress, but everyone afflicted with the malady, even in a seemingly mild form, is in danger of becoming a suicide or drifting into lunacy.

CAUSATION.—Though the term Neurasthenia is of modern origin, the complaint is an old one, and neurasthenics existed in antiquity as well as to-day. The seat of disease is, unquestionably, the sensitive tissues of the brain, and probably also of the spinal cord. The damago, however, is unrecognisable, owing to the fact that science has not yet evolved a microscope powerful enough to make molecular

changes visible. Many harmful influences are capable of inflicting such injury. Both sexes are liable, but men much more so than women. No period of life is exempt. Many sufferers have some physical or mental taint (gout, rheumatism, syphilis, alcoholism, or nerve-weakness) in the family. Many cases are traceable to overwork. Monotonous bodily toil is quite as often to blame as "brain fag." Sports and games, too, with the accompanying excitement of rivalry, may be quite as pernicious. Other sources of damage include: financial worries, prolonged grief, disturbed nights, abuse of alcohol, tobacco, or drugs, sexual excesses and vicious practices, shock from accidents or surgical operations, influenza and other acute complaints, disorders of the urino-genital organs, and such abnormalities as floating kidney. Neurasthenia in children has been ascribed to intestinal worms, bad teeth, and defective eyesight.

SYMPTOMS.—The symptom which, above all others, characterises early neurasthenia is increasing difficulty in performing the daily task. The particular organ chiefly employed, whether the mind, the eye, the ears, the hands, or any other part, becomes fatigued on slight exertion and incapable of sustained effort. The brain-worker cannot concentrate his thoughts or trust his memory as before; the musician loses his delicate appreciation of tone; the manual labourer is weary after half-an-hour's toil. Even trivial tasks become sometimes intolerably burdensome. Some sufferers are constantly restless, irritable and excited. Others complain of a sense of confusion, or of weight or oppression in the head. Headaches are fairly common, but are rarely severe till a later stage of the malady. Sleeplessness is a frequent symptom of neurasthenia, and usually occurs in spells of several nights, alternating with periods of sound sleep. Other troubles experienced with more or less frequency are cold, clammy hands and feet, loss of appetite accompanied by falling weight, constipation, giddiness, and a dragging pain in the back.

If the warnings conveyed by the early symptoms be accepted, and scientific treatment applied quickly, a complete cure can always be effected. But if matters are left to take their course, the stresses and worries of daily life steadily add to the disease, and the malady passes into a further and graver stage. Certain symptoms are common to nearly all neurasthenics who reach this phase. These are: profound depression and anxiety, and vague sensations of heat, cold, numbness, aches, prickling or stiffness in various parts of the body. Apart from these, the symptoms vary much in

different sufferers and appear to concentrate themselves on a particular organ or system. The following types may be noted:—

Mental Neurasthenia: persistent insomnia, headaches, memory getting worse, dizziness after every effort, prolonged brain-work quite impossible.

Spinal N.: pain and tenderness between shoulder-blades very marked, weakness, tingling and numbness in legs.

Cardiac N.: palpitations and breathlessness on slight exertion.

Dyspeptic N.: fulness and sinking feeling after food, flatulence, abdominal pain, alternating constipation and diarrhoea, sometimes marked wasting.

Sexual N.: nocturnal emissions, weight and pain in the genital organs, and diminution of virility.

Many neurasthenics also suffer from morbid fears or "phobias." Such are: *agoraphobia*, dread of open spaces; *claustrophobia*, dread of closed compartments; *monophobia*, dread of being alone; *anthropophobia*, fear of society; *pathophobia*, dread of one or other disease, such as cancer or syphilis; *batophobia*, fear of high places; *amaxophobia*, fear of being in a vehicle.

This pitiable condition may last for years. Not a few neurasthenics, however, who remain subject to the influences which induced the malady, get worse and worse, till they lapse into the third stage, definite insanity. Details would be out of place here. Only the most common varieties usually following neurasthenia may be named, such as acute or chronic mania, melancholia, delusional insanity, and dementia (complete loss of mental power).

COMPLICATIONS.—Besides insanity, neurasthenics exhibit a marked proclivity to many other dangerous maladies, such as cancer, gout, mucous colitis, brain and spinal disease, ending in apoplexy, locomotor ataxy, and general paralysis.

DANGEROUS TREATMENTS.—Neurasthenia has always been the playground of the quack, and fully fifty per cent. of all patent medicines cater for the victims of nervous debility. Avoid so-called *nerve-foods* and *tonics*, whether ready-made or prescribed by a doctor. The initial effect of the poisons they contain is exhilaration. Hence the temporary feeling of improvement. But the secondary results are, without exception, injurious, either to the nervous system or the stomach. Do not use *cocaine*, by which many a nervous system has been shattered. Avoid soporifics (*opium*, *chloral*, *sulphonal*, *veronal*, etc.) for procuring sleep. You may never wake again. Do not undergo a course of *Weir-Mitchell*

treatment. Its features are abundant diet and isolation. The former may produce life-long dyspepsia, while the depression and anxiety, increased by isolation, often ripen ideas of suicide. Avoid treatment by *physical exercise*, which may do serious harm by injuring the heart or spinal cord. Do not rely on *cold spongings* and *shower baths*. They are generally applied too drastically, to the great detriment of the heart; while *hypnotism*, though attractive in theory, never does permanent good.

SCIENTIFIC DIRECTIONS.—Relieve sleeplessness and obstinate constipation, if present, by the gentlest possible measures. Correct errors of diet, habits, occupation, and other evil influences which might aggravate the existing trouble, avoiding restrictions that are not absolutely necessary. Give *Acon.*, *Agar. musc.*, *Arn.*, *Bellad.*, *Camph.*, *Cham.*, *China*, *Coff.*, *Ferr. mur.*, *Graph.*, *Hepar sulph.*, *Hyos.*, *Nat. mur.*, *Nux vom.*, *Op.*, *Plat.*, *Rhus tox.*, *Silic.*, or *Verbasc.* in minute doses. Regulate dilutions (triturations) and doses according to the sufferer's age, constitution, and condition. Order suitable baths, compresses, and other external applications for acting on the nerves through the skin.

HYSTERIA.

This complaint not only gives rise to untold misery and incapacity, but often lands its unfortunate victims in asylums for the insane.

CAUSATION.—Hysteria is attributed to some injurious change in the minute structure of the automatic portion of the nervous system which controls the involuntary vital functions. Though males occasionally suffer, the female sex is most disposed to hysteria. The malady usually commences between 15 and 35, in a few cases at the change of life. Neuropathic heredity, habits of luxury, faulty or over-indulgent training, unhappy surroundings, and alcoholic excesses favour this malady. Protracted worry, grief or anxiety, religious doubts, vicious habits indulged in youth through ignorance, enforced celibacy, disappointed affections, unhappy marriage, and the strain of prolonged attendance on sick relatives or friends are also frequent forerunners of hysteria.

SYMPTOMS.—A tendency to be extravagantly affected by trifling annoyances is the usual early symptom. If there are also exaggerations of natural events or sensations, which begin without any apparent cause and often cease just as unaccountably, little doubt need be entertained that the

sufferer is hysterical. In addition, restlessness, irritability and excitability are always present.

Sooner or later the typical hysterical fits occur, which consist of paroxysms of laughter or weeping, sometimes followed by convulsive, jerking movements and contortions, ending in insensibility. Of other symptoms the commonest is a sense of choking and difficulty in swallowing, and of a lump rising in the throat. Others are: increased sensitiveness of the skin, leading to pains in various parts, tender spots in certain regions of the body, persistent loss of voice, constant cough, loss or perversion of taste, paralysis of one or more limbs, obstinate contractions of joints, retention, suppression, or excess of urine. More rarely sensation is lost, instead of exaggerated. Distaste for food may culminate in prolonged fastings.

COMPLICATIONS.—Many cases remain in the above condition for years, but others soon lapse into complete insanity, usually maniacal or melancholic.

DANGEROUS TREATMENTS.—Refuse resolutely large doses of the two drugs most generally prescribed; *bromide of potassium* may quieten for a time, but destroys irreplaceable nerve-tissue, while *valerian* produces extreme indigestion and nausea, and even its advocates claim no more than transitory relief from it. For the risks attending *Weir-Mitchell treatment* see Neurasthenia.

SCIENTIFIC DIRECTIONS.—Alleviate marked distress by the mildest means, preferably psychic. Eliminate bad habits, injurious occupations, worry and all harmful circumstances, without undue severity. Give the following remedies in suitable dilutions and doses:—*Agar. musc.*, *Arg.*, *Bapt.*, *Bellad.*, *Camph.*, *Canth.*, *Cham.*, *China*, *Cimic.*, *Coff.*, *Gels.*, *Hyos.*, *Ign. am.*, *Moschus*, *Nux vom.*, *Staphis.*, *Valer.*, or *Veratr. vir.*

CHRONIC SPINAL DISEASE.

When disease attacks the spinal cord it gives rise to one of the most appalling maladies. For the paralysis which results means years of hopeless and helpless invalidism, in which the sufferer often longs for death as a happy release.

CAUSATION.—The actual disease is damage to the spinal cord or the membranes covering it, and, as errors of life continually add to the injury, the nerve-tissues degenerate, or an abscess or tumour is formed. 30 to 45 are the years in which spinal maladies most frequently begin, though they may start at any age. Habitual great exertion, physical or mental, is a very common feature of the sufferer's history. Hence literary men, barristers, doctors, artists, actors, stock-

brokers, manufacturers, soldiers, aerobats, smiths and porters are frequent victims of spinal disease, as well as commercial travellers, engine-drivers, chauffeurs, and others exposed to continual vibration. But syphilis is believed to overshadow all else as an introducer of spinal mischief, and to account for ninety per cent. of all cases. Other influences are cold and damp, intemperance, acute maladies, injuries, sexual abuses and excesses, and the constant handling of various poisons.

SYMPTOMS.—The first symptoms are often slight and vague. One of the most constant and suggestive is weariness or actual pain in the back, between the shoulder-blades. Marked mental depression, lassitude, and fatigue on slight exertion are also common. The following, too, may be observed: failing memory, excessive perspiration, increased sexual appetite, and frequent erections, and such nervous disturbances as cold sensations in various parts, exaggerated sensitiveness of the skin, noises in the ears, and specks before the eyes.

A little later pain becomes more prominent. Most characteristic are sudden shooting or stabbing pains in the shoulders, neck, trunk, or limbs, the so-called "lightning-pains." Or there may be a severe pain which seems to constrict the body at or about the waist-line, whence it is called "girdle-pain." Further symptoms include hesitating, or stammering speech, agoraphobia (dread of open spaces), or other morbid terrors, failing eyesight, and a sensation as if the eyes were drying up.

The first definite indications of paralysis next make themselves felt. The sufferer is apt to lose his balance and to stagger. He feels as if walking on wool. As the months pass, this gets worse; he has to watch his feet when walking, and finally loses all control over his limbs so that he cannot take a step without help (*ataxia*). Less commonly the arms are mainly affected: a woman, for instance, cannot use her needle. The muscles waste till the limbs often reach a painful degree of thinness, when sensation of touch and pain greatly diminish. At this period the patient's sufferings are often increased by attacks of vomiting or diarrhoea. And now, too, he begins to lose control of his urinary organs. Either he is unable to pass water, and suffers the agonies of retention, or he cannot retain it, and it dribbles away involuntarily. Sexual power gradually disappears.

The later stages of such a case are truly pitiable. Incapable of walking or even standing, the sufferer is completely bedridden. His weakness steadily increases. His

paralysed bladder and bowels refuse to act, or do so without his knowledge. Bed-sores and foul ulcers of the feet supervene, and in some cases speech is so much impaired that the patient cannot even call attention to his wants. Finally death occurs from exhaustion, or from some complication favoured by the recumbent position. Or, perhaps, the retained urine decomposes, and general blood-poisoning gives the final blow.

COMPLICATIONS.—The outlook in spinal disease is extremely grave, unless scientific curative treatment is applied early. Retention of urine, bed-sores, or other complications invariably prove fatal.

DANGEROUS TREATMENTS.—Do not take *mercury*, for this drug, instead of curing, promotes degeneration of nerve-tissue, and aggravates spinal trouble that may have been caused by syphilis. Avoid *iodide of potassium*, which deranges digestion and causes bronchitis. Leave *nux vomica* and *strychnine* alone. Except in minute doses, they increase the irritability of the spinal cord, and may lead to fatal convulsions. Never resort to *antipyrin*, it may cause severe vomiting and collapse. Remember that preparations of *zinc* are irritant poisons and induce violent sickness. Never, under any circumstances, consent to be treated with *curare*; this substance paralyses the nerves, spinal cord, and heart, and may lead to death by arrest of respiration. Do not anticipate lasting benefit from *opium* and *morphine*; even where they relieve pain this effect quickly passes off, and their continued use notoriously deteriorates nerve-tissue. Avoid *bromide of potassium*; for reasons see Hysteria.

SCIENTIFIC DIRECTIONS.—Ward off death, if threatening, and relieve pain and other urgent symptoms, using only such measures as cannot do harm. Regulate the sufferer's life so as to exclude aggravating influences, without needlessly onerous prohibitions. Give the following in dilutions and doses appropriate to the case:—*Acon.*, *Agar. musc.*, *Ant. tart.*, *Arg.*, *Arn.*, *Ars.*, *Bapt.*, *Bellad.*, *Camph.*, *Canth.*, *China*, *Cocc. ind.*, *Coff.*, *Cupr.*, *Dig.*, *Dulc.*, *Graph.*, *Hydrast.*, *Hyos.*, *Liv. am.*, *Lupul.*, *Nat. mur.*, *Nux vom.*, *Op.*, *Phosph.*, *Phytol.*, *Rhus tox.*, *Staphis.*, *Tabac.*, or *Veratr.* Assist their action by suitable outward applications.

CHRONIC NEURITIS AND NEURALGIA.

These maladies, if neglected in early stages, often cause terrible suffering.

CAUSATION.—The mischief is located in the substance of the nerve trunks or branches, and is frequently un-

recognisable after death, though inflammation and degeneration may be apparent. These maladies occur chiefly in middle life, and in women rather more than in men. Trades specially liable include: writers, piano and violin players, telegraph operators, weavers, and also all who work with lead, arsenic, mercury, phosphorus, naphtha, and similar poisons. The most important factor in the production of neuritis or neuralgia is habitual abuse of alcohol. Others are: exposure to wet and cold, sexual indiscretions, pregnancy, and many infectious diseases, such as rheumatic fever, tuberculosis, syphilis, diphtheria, influenza, pneumonia, typhoid fever, smallpox, scarlet fever, gonorrhoea, and malaria.

SYMPTOMS.—The first symptoms are disturbed sensation, tingling, numbness, and cramps. They may occur in any part of the body, and develop into excruciating pain; its common situations being the head and face (facial neuralgia) and the leg (sciatica). After a time muscular power diminishes, or is completely lost. The hands are often subject to tremors, and become quite powerless, or walking is increasingly difficult; and ultimately, if all the limbs are attacked, complete paralysis and helplessness result. The paralysed muscles are very tender and undergo marked wasting. Some cases may thus go on for years; in others general bodily weakness rapidly increases, with feeble and intermittent pulse, and death may occur from heart failure or exhaustion.

COMPLICATIONS.—The most important of the numerous complications are: delirium, mania, melancholia, retention of urine, dropsy, bed-sores, mortification of the feet, consumption, and cirrhosis of the liver.

DANGEROUS TREATMENTS.—Avoid *gelsemium*, which in customary doses may cause giddiness, double vision, nausea, vomiting, and sometimes paralysis of the respiration and death. Refuse *butyl-chloral hydrate*, for it endangers the heart. Finally, have nothing to do with *mercury*, *iodide of potassium*, *digitalis*, *strychnine*, *arsenic*, *opium*, *salicylates*, *antipyrine*, and *valerian* in the quantities usually prescribed.

SCIENTIFIC DIRECTIONS.—Avert danger to life, if imminent, and soothe pain, without resort to drastic methods. Control consumption of alcohol, handling of poisons, and other possible sources of further mischief. Give suitable minute doses of: *Acon.*, *Arn.*, *Ars.*, *Bellad.*, *Cimic.*, *Coff.*, *Coloc.*, *Gels.*, *Glon.*, *Nux vom.*, *Phosph.*, *Plat.*, *Puls.*, *Spig.*, *Veratr. vir.*, or *Verbasc.*, and employ measures to act on the nerves locally, through the skin.

CHRONIC GRAVES' DISEASE.

[Parry's Disease, Basedow's Disease, Exophthalmic Goître.]

Graves' disease is not so uncommon as sometimes stated, being frequently overlooked, especially in its early stages. It is very apt to end in sudden death, but is not incurable.

CAUSATION.—The nature of the disease is very obscure. The only structural change always found, though not necessarily appreciable during life, is enlargement of the thyroid gland in the front of the neck. This enlargement probably affects important nerve trunks passing near. The malady attacks women far more often than men, commonly between the ages of 15 and 50. Its usual subjects are persons with a neurotic or hypersensitive heredity. The malady comes on gradually after periods of worry or stress, fright or grief. It has also been said to follow influenza, quinsy, or acute rheumatism.

SYMPTOMS.—Palpitation is the most marked of the initial symptoms by which the body's efforts to throw off the disease are manifested, the heart acting so rapidly and forcibly at times as to occasion considerable distress. The patient may also notice some weakness, loss of appetite, and shortness of breath. Pallor frequently affects the lips, tongue, and eyelids, as well as the skin. At this stage there may, or may not, be some enlargement of the front of the neck (the thyroid gland), and a certain prominence of the eye-balls. But these abnormalities, which may have been present for some time before the other symptoms mentioned, often escape the notice of the sufferer, and even of the doctor, if he has little experience of the malady.

In the absence of scientific treatment the malady soon passes into its second stage. The four chief characteristics of the complaint may now be observed. These are: rapid heart's action, trembling of the limbs, prominent staring eyes (*exophthalmos*), and, less constant, a visible swelling of the thyroid gland. In some cases the sufferer first seeks advice on account of other symptoms. The appetite may become bad, leading to loss of flesh, increasing debility, and languor. In a few cases, instead of wasting, the patient grows abnormally stout. There may be, in addition, nervousness, giddiness, flushing, sweating, shortness of breath, dry cough, discolouration of the skin, general or in patches, attacks of vomiting or diarrhoea, and leucorrhœa (whites). It is by no means rare for a patient to undergo months of treatment for one or other of these symptoms, without the true nature of her malady ever being recognised.

In the later stages, symptoms may grow steadily worse. Now, too, there is great likelihood of the advent of dangerous complications, any of which may prove quickly fatal. Death may occur from exhaustion after vomiting or diarrhoea, or from heart failure (*syncope*). The latter event may, indeed, take place even in the very early stages of the malady. The heart's action appears to be, from the first, so seriously disorganised that an almost imperceptible additional injury is sufficient to stop it altogether.

COMPLICATIONS.—The long-continued functional derangement of the heart not infrequently leads ultimately to structural heart mischief, which accordingly ranks as the commonest complication of Graves' disease. Further, the faulty work of the heart means impaired circulation in the lungs, and favours the onset of bronchitis and pneumonia. Other fatal complications are acute mania (with death in a few days), Bright's disease, and diabetes.

DANGEROUS TREATMENTS.—Remember *belladonna*, in large and repeated doses, causes dilated pupils, excitement and delirium, often followed by paralysis, stupor, and even death. Avoid *digitalis*, *strophanthus*, *convallaria*, and other "cardiac tonics" in usual doses. They increase the risk of fatal heart failure. Never take *ergot*, which produces giddiness, spasms, convulsions, and sometimes death. Reject *thyroid extract*. In large doses it depresses the heart and favours emaciation and exhaustion. Do not waste time and money on *serumtherapy*; it is only in the experimental stage, and you cannot afford to be made the subject of experiments, when ill. Lastly, on no account consent to *surgical interference* with the thyroid gland, which is attended by a very high mortality; while the small percentage of cures claimed does not justify the risk.

SCIENTIFIC DIRECTIONS.—Prevent threatened heart failure by the gentlest means available, and lessen palpitation, if distressing. Eliminate deleterious influences, such as worry, drastic drugging, and unsuitable work. Give, in proper dilutions and doses, the following modicaments:—*Acon.*, *Ac. fluor.*, *Ars.*, *Bar. carb.*, *Calc. carb.*, *Camph.*, *Carb. veg.*, *Cimic.*, *Cocc. ind.*, *Coff.*, *Collins.*, *Dig.*, *Ferr. mur.*, *Gels.*, *Graph.*, *Hydrast.*, *Iod.*, *Lycopod.*, *Nux vom.*, *Silic.*, *Spig.*, or *Valer.* Aid the treatment by outward applications. **CHRONIC RHEUMATISM.**

[Rheumatoid Arthritis, Osteo-Arthritis.]

This very common malady is chiefly remarkable for its painful nature and its obstinate resistance to treatment. It is perfectly curable.

CAUSATION.—Both the nature and cause of the disease are obscure. Some attribute it to an undiscovered micro-organism, others believe it is damage to the nerves. There is no age limit for chronic rheumatism, but it is commonest during and after middle age. Women are more liable than men. The complaint is frequent in persons subject to exposure. Prolonged worry, anxiety, and debilitating illnesses, such as influenza or inflammatory disorders of the female reproductive organs, the mouth, gums or throat, and digestive disturbances, sometimes appear to lead to the malady. Often no cause can be traced.

SYMPTOMS.—Pain in one or more joints, particularly the hands and fingers, is generally the first symptom. The larger joints follow, and frequently the neck and jaw. Stiffness accompanies the pain, which is aggravated by movement and may be slight, but is often very severe, especially on first rising. The joints become swollen, the skin over them red and shiny. Pain may be almost constant, but often recurs in spasms. Sometimes there is slight fever during acute pain. If, in addition, appetite is bad, the sufferer grows weak and very depressed. The joints become deformed, crackle when moved, and the neighbouring muscles waste. Movement is more and more difficult, and ultimately the patient may be completely crippled. Small lumps, known as *Heberden's nodes*, often form on the finger bones, and the skin may be disfigured by brown stains. In some cases the muscles, rather than the joints, are painful, especially the back (lumbago), side (pleurodynia), and shoulder muscles.

COMPLICATIONS.—Heart disease may supervene as a complication of chronic rheumatism, and, more rarely, Bright's disease. Inflammations of the eyes also occur.

DANGEROUS TREATMENTS.—Avoid *salicylic acid* and its compounds (such as *aspirin*), *iodide of potassium*, *arsenic*, and the application of *blisters*. All these involve risks which are described under Gout, Diabetes, and Spinal Disease. Note that *guaiacol* may cause dangerous collapse.

SCIENTIFIC DIRECTIONS.—Relieve pain by gentle measures which will not aggravate the disease. Modify the sufferer's occupations and habits, without undue rigour. Order suitable baths and outward applications, and give homœopathic doses of: *Acon.*, *Ac. fluor.*, *Arg.*, *Arn.*, *Bry. alb.*, *Canth.*, *Hamam.*, *Hydrast.*, *Ledum*, *Phytol.*, *Puls.*, *Rhus tox.*, *Spig.*, or *Sulph.*

DIABETES.

Diabetes is a serious malady, wrongly regarded as in-

curable. It occurs in two forms. In one (Diabetes Mellitus) the patient passes vast quantities of urine containing sugar; in the other (Diabetes Insipidus) the urine, though equally abundant, never contains sugar.

CAUSATION.—Pathology has so far failed to throw much light on the nature of the disease in diabetes, which is in some cases situated probably in the nervous system, in others in the pancreas, or in the liver. Diabetes attacks all white and brown races, but is, curiously, unknown among the Chinese, Japanese, and negroes. It occurs at all ages, but more frequently after 35; and men outnumber women among its victims by more than two to one. The well-to-do and intellectual classes, town-dwellers, and persons of sedentary habits suffer most. It is, unquestionably, often hereditary, and is also apt to occur in those whose parents or relatives have suffered from insanity, consumption, gout, rheumatism, Bright's disease, or syphilis. Circumstances preceding symptoms of diabetes include: continued worry and excitement, accidents and injuries to the head, inflammations and tumours of the brain, chest, or abdomen, exposure to wet and cold, abuse of alcohol, sweets, and starchy foods, excessive sexual indulgences and vicious practices, and certain definite maladies, such as influenza, rheumatism, gout, syphilis, and Graves' disease.

SYMPTOMS.—The earliest symptoms are usually very slight. There may be a feeling of weakness or, in a few cases, sharp pains in the small of the back and shooting down the thighs. Or a man may discover that he is losing weight and getting thinner. More often the first thing noticed is increased thirst, or the fact that water has to be passed more often than formerly.

After a time, if no treatment is applied, thirst becomes more urgent, and the patient has to drink great quantities of fluid. At the same time he, naturally, also passes much water, and his rest is seriously disturbed by the incessant calls to rise for that purpose. The urine is usually pale in colour. It may have a sweetish smell and high specific gravity, and contain a large, but variable, amount of sugar (Diabetes Mellitus); or it may be of a very low specific gravity and contain nothing abnormal at all (Diabetes Insipidus). Occasionally the latter condition passes into the former, but more often the two varieties remain distinct throughout. Appetite, as well as thirst, is now often increased, but, nevertheless, wasting progresses steadily, and the sufferer becomes painfully thin and weak. Though digestion is good, the bowels are obstinately constipated.

Headaches are frequent, and the mind is depressed and irritable. Sexual desire is generally lost. The skin becomes dry, rough, and harsh, the hair and nails thin and brittle. The pulse is small and feeble, the temperature lowered, and the face may show a constant hectic flush.

Ultimately, if the sufferer is not carried off by one of the complications of the malady, the last phase supervenes, ushered in commonly by loss of appetite and diminution in the amount of urine. With this there may be severe flatulence, hiccough, and attacks of violent diarrhoea and abdominal pain. Then follow insomnia, restlessness, excitement, and even delirium, with rapid pulse and hurried, deep breathing. Drowsiness sets in, and passes by degrees into insensibility (coma). The patient cannot be roused, but lies motionless, with pale face, half-open eyes, cold hands and feet, small pulse, and a very low temperature. Occasionally a peculiar sweetish odour of the breath may be noticed. Coma gradually deepens, and death takes place usually in two or three days.

COMPLICATIONS.—Many patients die from complicating maladies and never reach the stage of diabetic coma. Pneumonia may supervene, and consumption occurs in a large proportion of diabetics. Less fatal complications include: eczema, carbuncles and other skin troubles, mortification of the feet, neuralgia, cataract of the eye, ulcerations of the mouth, and deafness.

DANGEROUS TREATMENTS.—Refuse to take *opium* in large doses, the mainstay of routine practice. While it reduces the amount of sugar passed, this effect ceases directly the drug is discontinued, and it has no curative action whatever. On the other hand, its ill-effects are notorious. Avoid *arsenic*, a dangerous poison except in very minute doses. It causes degeneration of the nerves, which may end in complete paralysis. Put no faith in *uranium nitrate*, though it is one of the latest "specifics." It seriously deranges the digestive functions, but its beneficial action has not been substantiated. Remember the dangers of the *salicylates*, *ergot*, and *valerian*, which are dealt with under Gout, Graves' disease and Hysteria. Do not accept the universal panacea, *change of air*. Diabetics bear travelling badly, and many have been banished from home, only to meet death amidst uncongenial surroundings.

SCIENTIFIC DIRECTIONS.—Relieve, in the gentlest way possible, dangerous symptoms threatening coma or death. Correct everything which might add to the existing disease, such as overwork, worry, alcoholic and other excesses. Give

the following homœopathic remedies, in dilutions and doses adapted to circumstances:—*Arg.*, *Bellad.*, *China*, *Coff.*, *Collins.*, *Dig.*, *Ferr. mur.*, *Gels.*, *Hamam.*, *Hyos.*, *Ign. an.*, *Kreasot.*, *Lupul.*, *Mosch.*, *Nux vom.*, *Op.*, *Sabad.*, *Staphis.*, *Thuja occ.*, *Valer.*, or *Verbasc.*

CHRONIC GASTRITIS.

This is one of the commonest of all known maladies and, perhaps for that very reason, is often mistakenly regarded as unimportant. It is the cause of a great deal of preventable suffering, and is apt to develop complications which rarely fail to shorten life.

CAUSATION.—The disease itself is damage to the mucous membrane of the stomach, and this may be of any degree of severity. Ulceration (see below) is believed to be due to the stomach digesting its own mucous membrane, an impossibility while the latter remains healthy. Gastritis occurs at all ages, in both sexes, and in every rank of life, but most frequently in those who follow a sedentary occupation. Intemperance is a common precursor of gastritis. Others are: excessive use of tobacco, general debility, anæmia, tuberculosis, gout, diabetes, heart disease, Bright's disease, cancer, and cirrhosis of the liver. In many cases the evil results of such influences are aggravated by errors of diet, either habitual excess, hurried or irregular meals, or the use of unsuitable food or drink. Or the trouble may appear to be brought on by overwork, worry, anxiety, sexual abuse or excess, or constant drug-taking.

SYMPTOMS.—The principal symptom is discomfort of some kind after eating. It may be merely a feeling of fulness, weight or oppression at the chest; or there may be actual pain, which commonly passes through to the back, between the shoulder-blades. There may be pain before food, generally aggravated, but sometimes relieved, by eating. In addition, flatulence is common, with eructations of wind, and also heartburn, nausea, water-brash, or actual vomiting. The appetite is poor or capricious, occasionally ravenous, the tongue foul, the breath offensive, and there is an unpleasant taste in the mouth, and frequent headaches. The bowels are confined, as a rule, but may be subject to attacks of diarrhœa. These symptoms need not be constantly present, but may occur at irregular intervals, or only after certain articles of diet.

If treatment is neglected, acute attacks become more and more frequent, and the sufferer's life is a misery, for every kind of food "disagrees" with him. Now, too, the

sufferer loses flesh, and becomes steadily weaker. Thirst may be very troublesome, sleep is often disturbed, and the mind depressed and irritable. In some cases (ulcer of the stomach) blood is vomited; and this, if severe, may result in collapse and death. Blood may also appear in the stools (black and tarry-looking, not red). Such hæmorrhages are often followed by great prostration and anæmia.

COMPLICATIONS.—A common complication of gastritis is dilatation of the stomach, shown by crampy pains, very profuse vomiting, and visible movements of the enlarged organ. When the stomach is ulcerated, perforation may occur, leading to rapidly fatal peritonitis, or to an abscess in the abdomen or chest. Lastly, cancer of the stomach and colitis are by no means rare aggravations of gastritis.

DANGEROUS TREATMENTS.—Avoid large doses of *bicarbonate of soda* and other alkalies. They promote dilatation of the stomach. Beware of "sedative" drugs, such as *bismuth* and *oxalate of cerium*, for they obstruct the body's curative efforts. Above all, resolutely refuse to swallow *hydrocyanic acid* (prussic acid); it is the deadliest poison known. Do not take *opium* to relieve pain; it soon becomes a dangerous habit. Don't try to relieve the stomach of its duty by taking *pepsine*, *diastase*, or similar preparations. Digesting your food artificially only encourages your stomach to neglect its proper work. Do not permit *washing out of the stomach*. This extremely unpleasant procedure is the cruel invention of a theorist. Never submit to very stringent diet regulations. Semi-starvation weakens the body still more. Do not consent to *operations*, unless acute peritonitis has been diagnosed.

SCIENTIFIC DIRECTIONS.—Alleviate pain, vomiting, and constipation by mild and harmless measures. Regulate the diet, with painstaking attention to the sufferer's personal idiosyncrasies. Check indulgence in stimulants, overwork, and other causes of additional damage. Give drugs from the following list, in suitable small doses:—*Acon.*, *Ant. tart.*, *Arn.*, *Ars.*, *Bellad.*, *Bry. alb.*, *Caps.*, *Carb. veg.*, *Cham.*, *China*, *Cocc. ind.*, *Coff.*, *Cupr.*, *Dig.*, *Dulc.*, *Ferr. mur.*, *Graph.*, *Hamam.*, *Hepar sulph.*, *Hydrast.*, *Ign. am.*, *Iod.*, *Ipec.*, *Iris vers.*, *Kreasol.*, *Lupul.*, *Lycopod.*, *Nux vom.*, *Op.*, *Petrol.*, *Phosph.*, *Phytol.*, *Plat.*, *Podoph.*, *Puls.*, *Rhus tox.*, *Sabad.*, *Staphis.*, *Tabac.*, *Valer.*, and *Veratr.* And act on the affected organ by means of gentle external applications.

CHRONIC COLITIS.

Colitis, though not very common, is less rare than many imagine, for it often exists for years without the true nature

of the trouble being diagnosed. It is a very weakening complaint, and appendicitis and intestinal cancer, which often follow it, may be favoured by it.

CAUSATION.—The disease is situated in the mucous lining of the colon, or large bowel. Colitis occurs at any age, though said to be rare after 50; and it is more common in women than in men. Nervous disposition has a marked influence in favouring colitis; and so also has prolonged residence in the tropics. Often there is a history of chronic gastritis, or of inflammation of the female reproductive organs.

SYMPTOMS.—The malady occurs in two forms. In one, severe and repeated diarrhoea is the chief symptom; in the other, obstinate constipation is the rule. In both varieties much mucus is passed; it is the habitually constipated sufferers, however, who pass the long tubes or casts of mucus, which account for the name *mucous colitis*. In both varieties griping pain in the abdomen and sometimes blood accompany the passage of mucus. The tongue is usually covered with a white fur, the appetite is very poor, and the mind depressed and gloomy. Occasionally there is an attack of vomiting. And in the course of months, or years, the patient grows thin and weak, finally becoming a hopeless invalid.

COMPLICATIONS.—The complications include: cancer, appendicitis, metritis, and allied disorders. Perforation of the bowel and peritonitis may occur, also piles, neurasthenia, hysteria, and sometimes insanity.

DANGEROUS TREATMENTS.—Refuse strong *purgatives*, and avoid powerful doses of *opium*. Both are liable to add to the existing disease, by increasing the irritability of the bowel. Never consent to the disgusting *operation* of opening the bowel in the region of the groin. It is dangerous and leads to relapses.

SCIENTIFIC DIRECTIONS.—Relieve pain, vomiting, constipation or diarrhoea, if troublesome, never losing sight of the rule to avoid doing harm. Correct errors of diet and mode of life, without imposing excessive restrictions. Give the following remedies, varying the dilutions and doses according to the patient's age and condition:—*Acon.*, *Aesc. hipp.*, *Arn.*, *Ars.*, *Bellad.*, *Bry. alb.*, *Calc. carb.*, *Carb. veg.*, *Cham.*, *Coff.*, *Coloc.*, *Cupr.*, *Dulc.*, *Ferr. mur.*, *Graph.*, *Hydrast.*, *Hyos.*, *Ign. am.*, *Ipec.*, *Iris vers.*, *Kreasot.*, *Nat. mur.*, *Nux. vom.*, *Op.*, *Petrol.*, *Phosph.*, *Phytol.*, *Plat.*, *Podoph.*, *Puls.*, *Rhus tox.*, *Sabad.*, *Sepia*, *Spig.*, *Sulph.*,

Tabac., *Veratr.*, or *Verbas.* And apply local treatment through the skin.

CIRRHOSIS OF THE LIVER.

Unless effectually dealt with on scientific lines in the early stages, this is a fatal malady.

CAUSATION.—The essential disease is in the liver, the active cells of which, in the course of the malady, are destroyed and replaced by useless fibrous tissue. Cirrhosis of the liver is in the main a malady of middle age, and occurs mostly in males. Residence in the tropics favours its onset, and commercial travellers, publicans, restaurateurs, waiters, etc. are specially liable. Undoubtedly the chief cause of damage, in the great majority of instances, is alcoholic excess. Some cases, however, are due to syphilis, cancer, a parasitic worm (the hydatid worm or *echinococcus*), and other agents.

SYMPTOMS.—The earliest symptom is fulness or dull pain in the liver region (about the right lower ribs), or possibly slight jaundice, *i.e.*, a yellow tinge of the skin. Digestive troubles also appear, with loss of appetite, furred tongue, nausea, and irregular bowels. Vomiting on rising in the morning (provided it is not due to pregnancy) is also very suggestive of this trouble. Vomiting of blood sometimes occurs, and black blood may be passed from the bowels. Lastly, the abdomen becomes gradually distended with fluid (*ascites*), sometimes to an enormous degree, and the legs may share in the dropsy. In a few cases jaundice becomes very marked, and the urine dark brown or green, ascites being slight or absent. Meanwhile, the sufferer grows steadily thinner and weaker. Delirium and coma often follow, and death soon ensues.

COMPLICATIONS.—Piles is a common complication. Others include: general neuritis, pleurisy, consumption, insanity, Bright's disease, peritonitis, and cancer. But death frequently occurs before complications have time to develop.

DANGEROUS TREATMENTS.—Avoid *purgatives*, especially *calomel*, also *mercury* in other forms, *digitalis*, *squill*, *copaiba*, *opium*, and *morphine* in drastic doses. All these are harmful, for reasons set forth in other sections. Don't have the abdomen tapped for ascites. Fatal peritonitis may follow.

SCIENTIFIC DIRECTIONS.—Moderate, by very gentle means, such dangerous symptoms as delirium and coma. Judiciously limit the use of alcohol. Give appropriate small doses of: *Acon.*, *Ant. tart.*, *Arn.*, *Ars.*, *Bar. carb.*, *Bry. alb.*, *Canth.*, *Cham.*, *China*, *Cocc. ind.*, *Coff.*, *Cupr.*, *Dig.*, *Ferr. mur.*,

Hamam., *Hydrast.*, *Ipec.*, *Iris vers.*, *Kali bichrom.*, *Kreasot.*, *Lycopod.*, *Nat. mur.*, *Nux vom.*, *Op.*, *Phosph.*, *Phytol.*, *Podoph.*, *Rhus tox.*, *Staphis.*, *Tabac.*, or *Veratr.* Further, act on the liver through the overlying skin.

CHRONIC DISEASE OF THE HEART.

The seriousness of this malady is familiar to all. But it is not so generally known that hundreds of deaths from this cause take place every year, which might have been prevented by prompt scientific treatment. Unfortunately, many people are imbued with the entirely mistaken notion that heart disease is necessarily incurable. Hence sufferers despairingly accept their supposed inevitable fate, instead of seeking out, and persevering with, the skilled treatment that could give them many additional years of happy and useful life.

CAUSATION.—The disease is damage of some kind to the heart (and may be visible or invisible in the dead). So-called functional heart trouble is merely the first stage of one of the organic varieties. But the structural alterations seen in the heart on dissection are, generally, not the disease, but the results of Nature's efforts to re-establish the proper working of the heart.

Heart disease may occur at any age, but it is rare in young children, and liability increases with age. Males suffer rather more often than females. Continual muscular strain undoubtedly acts adversely on the heart; hence smiths, sawyers, porters and labourers are prone to develop heart troubles, and so also are rowing men and other athletes. Other injurious influences include alcoholic and sexual excess, vicious habits, heavy smoking, chronic poisoning by lead, phosphorus, arsenic or antimony, general obesity, tumours, blows on the chest, sudden or long-continued violent exertions, and many mainly infectious maladies. Of the latter rheumatism is the most important, so-called acute rheumatism (rheumatic fever) being accountable for more than half of all cases of heart disease; while others are phthisis, scarlet fever, typhoid fever, tonsillitis, and syphilis. Further, anæmia, arterio-sclerosis, St. Vitus's dance, gout, Bright's disease, Graves' disease, and diabetes may be followed by heart disease.

SYMPTOMS.—As a rule the earliest symptoms are very slight, though to the experienced observer they at once suggest disturbance of the heart's functions. Sleeplessness in one form or another is often the first. Shortness of breath may accompany this symptom, but it may only become apparent on running or going upstairs. Pain generally

appears later: either a dull aching in the front of the chest, or sharp, severe pain extending from the chest up the neck and down the arms, especially the left. Bleeding from the nose and frequent headaches are also highly suggestive. Other symptoms are: cold hands and feet, palpitations, feelings of faintness and dizziness. Very often no advice is sought for these apparently trifling disorders, but if a physician is consulted, the signs of faulty working of the heart reveal themselves on systematic examination.

In the meantime the recuperative forces of the body deal with the disease and, in consequence, the heart undergoes certain (at first very slight) changes, which enable it to overcome the obstruction and carry on its work well enough for all the individual's needs. In medical phraseology, Nature "compensates" the heart's defects, with the result that the symptoms are for some time even less prominent than before. There may be shortness of breath on great exertion, the victim's ears and lips may have a bluish tinge, or he may notice the forcible beating of his enlarged heart. But many are quite unaware of anything wrong with them, and go on misusing the heart and thereby upsetting again the equilibrium Nature herself has re-established.

Meanwhile, therefore, hostile influences still act unchecked and daily add to the disease. Thus symptoms gradually become more constant, and now the sufferer feels very ill. He is pale and anæmic or florid and purple-cheeked, according to the variety of heart disease he is afflicted with; and his lips are livid or blue. His expression is anxious, his mind irritable and restless, and he may have fits of violent delirium. Shortness of breath occasions much distress. Many sufferers cannot lie down at all, but have to seek repose in a sitting posture, and sleep is disturbed even without this trouble. There is a sensation of weight and oppression at the chest, pain radiating to the arms, or attacks of *angina*. The heart-beats are weak, irregular, and interrupted, and violent palpitations occur at short intervals. Headache, giddiness, and cough, with expectoration which may be bloody, are common symptoms. Digestion is deranged: there is much flatulence, and there may be attacks of vomiting or diarrhoea. The urine is scanty and high-coloured, with a tendency to deposit a red sediment, and may contain albumen. The feet swell up with dropsy, which gradually spreads upwards and in time involves the trunk, arms, face, and internal organs. When this condition has been reached, there is an ever-present danger of sudden death, which may be precipitated by shock or exer-

tion, or may take place without warning, even during sleep. More often the sufferer, growing weaker and weaker, succumbs from sheer exhaustion, or is carried off by one or other complication. In either case, his last days constitute a long-drawn misery. Propped up by pillows, he sits gasping for breath, too weak to move his huge, swollen limbs, his livid face bathed with clammy sweat, and his whole body shaken by his incessant cough and by the tumultuous throbbing of his enormous and overtaxed heart. He cannot sleep, but from time to time falls into a short stupor, which neither rests nor refreshes him; and finally death mercifully closes the scene.

COMPLICATIONS.—Bronchitis is the most frequent complication, and occurs at some period in most cases. Even if slight, it may be fatal, owing to a great portion of the lungs being put out of action by dropsy. Pneumonia, also, often proves deadly. Embolism (sudden blocking of an artery) in the brain frequently causes death or serious paralysis. Stagnation of the blood may lead to disease of the liver (cirrhosis) or kidneys (Bright's disease); and less common complications include diabetes, locomotor ataxy, and insanity.

DANGEROUS TREATMENTS.—Do not take allopathic doses of *digitalis*, *strophanthus*, *chloral*, *veronal*, *opium*, *salicylates*, *mercury*, *iodide of potassium*, *nux vomica*, and *strychnine*, the risks of which are all described elsewhere. Don't undergo *Oertel's treatment* (restriction of fluids, Turkish baths, and hill-climbing) or the *Nauheim treatment* (gymnastic exercises and saline baths). They are unsuitable to many kinds of heart disease and do incalculable harm if vigorously applied, as is the custom. Reject such dangerous and unjustifiable methods as *bleeding*, *leeching*, and *puncturing the legs* to relieve dropsy.

SCIENTIFIC DIRECTIONS.—Guard against sudden death, and relieve pain, sleeplessness, distressing shortness of breath, and cough, employing the mildest agents possible. Restrict exercise, diet, stimulants, and everything else that increases the work of the heart; but do not make rules of unnecessary stringency. Order suitable outward applications, and give the following remedies, adjusting the dilutions and doses to the patient's individual needs:—*Acon.*, *Ant. tart.*, *Apis mell.*, *Arg.*, *Arn.*, *Ars.*, *Bellad.*, *Bry. alb.*, *Cal. off.*, *Camph.*, *China*, *Cimic.*, *Cocc. ind.*, *Coff.*, *Collins.*, *Dig.*, *Dros.*, *Glon.*, *Hamam.*, *Hepar sulph.*, *Hyos.*, *Kreasot.*, *Nat. mur.*, *Nux vom.*, *Op.*, *Phosph.*, *Silic.*, *Spong.*, *Tabac.*, *Valer.*, or *Veratr.*

HARDENING OF THE ARTERIES.

[Arterio-sclerosis.]

Unfortunately this malady is very frequently overlooked in the early stages. It brings the first warning of death for the great majority of people who reach middle age. Arterio-sclerosis is, in fact, premature old age and break-up, but it is quite curable.

CAUSATION.—The disease is damage to the walls of the arteries. All the arteries of the body may be affected; but often the disease is localised, and symptoms and complications limited accordingly, to the brain, spinal cord, heart, lungs, or kidneys, as the case may be. Hardening of the arteries is a malady of middle and later life, and is rather more common in men than women. Its onset is favoured by certain occupations, such as publicans and their employés, blacksmiths, bakers, cooks, and lead-workers. The factors which produce or aggravate the trouble include: intemperance, overeating, especially of flesh foods, immoderate smoking, sexual excesses, vicious habits, prolonged muscular exertion, and business worries. Of maladies syphilis ranks first, followed by gout, scarlet fever, and typhoid fever.

SYMPTOMS.—The first symptoms are so mild that they are usually dismissed as insignificant, whereas they ought to be accepted as warnings of the gravest danger. Disturbed sleep, in particular, with its consequences, drowsiness, morning fatigue, and indisposition for work, should always excite apprehension. If, in addition, the mind is nervous and despondent, the thoughts confused, the face pale, the hands and feet coldish, headaches and attacks of indigestion frequent, there is every probability that the arteries have begun to harden.

If no treatment is applied, other symptoms appear. Water is passed very frequently, especially at night. The heart beats forcibly, at times even palpitating. Giddiness is common, particularly on rising to the upright position, and may be accompanied by rushing noises in the ears. The mind is now generally irritable, though there may be intervals of apathy, with loss of memory and power of concentration. Sleep is unsatisfactory, generally broken, dreamy, and unrefreshing. The pulse is slow, and can often be seen at the wrist. The sufferer now looks sallow and wasted and more than his age. Some patients of gouty tendency may, however, retain their florid complexion, but their flesh is usually flabby. Other symptoms often complained of are: weight and pain in the chest, shortness of

breath, cough and expectoration, abdominal pain, flatulenco and vomiting, tingling, coldness, cramps and pains in the limbs, increased susceptibility to alcohol and tobacco, and attacks of bleeding from the nose.

In course of time all the symptoms become worse, and at length the patient cannot walk many yards without resting. Sometimes the feet are attacked by mortification, and the hands, nose, and ears may be similarly affected. Headache is continual; the mind alternates between depression and irritability, aggravated by feelings of apprehension, and there may be temporary loss of speech, or one-sided paralysis. The breathing is seriously impeded, and cough incessant. Sexual power is lost. And fits, delusious, or hallucinations may occur. A common symptom at this stage is *angina pectoris*. This consists of sudden, spasmodic attacks of excruciating pain in the chest, accompanied by irregular action of the heart, great anxiety, and a sense of impending death. The pain has been described as the most agonising that one can imagine. Death in arterio-sclerosis may suddenly supervene (with or without augina) from heart failure.

COMPLICATIONS.—Complications are, as already indicated, frequent. Swellings, known as aneurysms, are apt to form on the diseased arteries, and may ultimately burst. In the case of a large artery, the patient bleeds to death in a few minutes. The heart always enlarges when the arteries are diseased, and is extremely likely to undergo other damage in consequence. When the arteries of the brain are involved they may become blocked (thrombosis), or may burst (apoplexy); and in either event, if death does not follow immediately, there is sudden and serious paralysis. Arterio-sclerosis, by interfering with the blood-supply, leads in the spinal cord to degeneration and paralysis, in the lungs to emphysema and bronchitis, and in the kidneys to the degenerative changes known as Bright's disease.

DANGEROUS TREATMENTS.—Don't take large doses of *amyl nitrite*, *nitro-glycerine*, *erythrol tetranitrate*, or the *nitrates*. They cause headache, depression, very rapid pulse and breathing, and sometimes death from suffocation. They have no curative effect. Avoid *iodide of potassium*, *digitalis*, *strophanthus*, *strychnine*, and *caffeine* as commonly given. All are referred to elsewhere. Avoid drastic *hydropathy*, such as cold baths, hot air, vapour, and Nauheim baths; everything drastic may lead to complete failure of circulation, and sudden death. On no consideration allow yourself to be *bled*; it is quite unjustifiable.

SCIENTIFIC DIRECTIONS.—Alleviate anginal or other pain, feebleness of pulse, and marked breathlessness by suitable agents of the mildest character. Correct errors which add to the damage, such as over-indulgence in flesh food and alcohol, exposure to great heat, and faulty sexual hygiene. And give the following, in the strength and dosage the symptoms demand:—*Acon.*, *Ant. tart.*, *Arg.*, *Arn.*, *Ars.*, *Bellad.*, *Bry. alb.*, *Cal. off.*, *Camph.*, *China*, *Cimic.*, *Coff.*, *Dig.*, *Ferr. mur.*, *Gels.*, *Glon.*, *Hyos.*, *Iod.*, *Kali bichrom.*, *Kreosot.*, *Lupul.*, *Nux vom.*, *Phosph.*, *Sabad.*, *Silic.*, *Spig.*, *Staphis.*, *Tabac.*, *Thuja occ.*, *Valer.*, or *Veratr.*

VARICOSE VEINS IN THE LEGS.

Varicose veins give rise to a great deal of pain, discomfort, and incapacity, and may even cause death.

CAUSATION.—The disease affects the walls of the veins, which, in the course of the neglected malady, undergo degeneration and lose their healthy elasticity, so that the vessels become distended with blood. Rare in childhood, the malady becomes increasingly frequent up to middle age. Men suffer more than women. Heredity can often be traced, and general debility favours the trouble. Shop assistants, soldiers, policemen, waiters, and carpenters are very liable to this complaint. Prolonged standing, tight garters, repeated pregnancies, abdominal tumours and heart disease are the principal conditions which are followed by varicose veins.

SYMPTOMS.—In many cases enlarged veins are noticed in or under the skin, as bluish lines following a winding course, before symptoms are felt. Then symptoms appear, such as cold feet, weight, fulness, smarting, itching, pricking, and tingling in the legs. Cramps are common, there may be loss of power in the limbs, and pain on walking or standing may become severe. At times the ankles and feet are swollen and dropsical.

Without treatment matters grow worse, and the veins may ultimately stand out in knotted masses. There is constant risk that such a vein may burst, when bleeding is very profuse, and causes great prostration or even sudden death.

COMPLICATIONS.—Two complications are to be feared: chronic eczema and ulcer of the leg. The latter is very intractable, and often continues as an open wound throughout life.

DANGEROUS TREATMENT.—Refuse surgical operations, the orthodox but unjustifiable treatment, which often fails to cure, and leaves permanent weakness in the limbs.

SCIENTIFIC DIRECTIONS.—Soothe pain and distress, if present, by the use of harmless external applications. Exclude fatigue and unsuitable garments as far as practicable, without going to extremes. Order baths, compresses, etc., as required, and give appropriate minute doses of *Acon.*, *Ac. fluor.*, *Arn.*, *Ars.*, *Cal. off.*, *Collins.*, *Dig.*, *Ferr. mur.*, *Graph.*, *Hamam.*, *Hepar sulph.*, *Puls.*, *Scpia*, *Silic.*, or *Sulph.*

VARICOCELE.

This malady is responsible for much inconvenience and pain, and the mental distress attributable to varicocele may be a most serious matter.

CAUSATION.—The veins connected with the testicle are degenerated and dilated in this malady, precisely as occurs in the legs. The trouble affects young men between 15 and 30, very rarely later. Sexual excess and, still more, secret vice are the main factors. The complaint appears sometimes to be hereditary.

SYMPTOMS.—The enlargement of the veins just above the testicle may be noticed long before any symptoms make themselves felt. It is almost always the left veins that are affected. These are swollen, knotty, and tortuous, feeling “like a bag of worms,” and can be felt to dilate on coughing. There is a sensation of weight and fulness, and aching, dragging, or even neuralgic pains, coming on after exertion. Emissions may be unusually frequent, and the mind is commonly very depressed. This may lead to insomnia, loss of appetite, and wasting.

COMPLICATIONS.—Wasting of the testicle occurs sometimes, occasionally affecting both sides, and leading to impotence. Neurasthenia and melancholia are possible results of brooding over the trouble.

DANGEROUS TREATMENT.—Avoid operations; they are dangerous and totally unnecessary.

SCIENTIFIC DIRECTIONS.—If pain and physical distress are prominent, which they rarely are, relieve them by mechanical support to the part and mild local applications. Correct faults of living and bad habits likely to aggravate the trouble. Give minute doses of: *Acon.*, *Ac. fluor.*, *Arn.*, *Ars.*, *Bellad.*, *Cal. off.*, *Canth.*, *Collins.*, *Dig.*, *Ferr. mur.*, *Gels.*, *Graph.*, *Hamam.*, *Iod.*, *Lupul.*, *Nat. mur.*, *Op.*, *Phosph.*, *Puls.*, *Scpia*, *Staphis.*, *Sulph.*, or *Thuja occ.*

CHRONIC PILES.

[Hæmorrhoids.]

This malady is not only the direct cause of pain and discomfort, but is also apt to encourage the occurrence of such dangerous complications as cancer of the lower bowel.

CAUSATION.—The disease is damage to the veins of the lower bowel, which, if neglected, become degenerated and dilated during the malady, precisely like varicose veins in the legs. Piles occur most frequently during adolescence and middle age. In youth men suffer more than women, later the sexes are about equally affected. Among the influences favouring the occurrence of piles are: residence in a warm, moist climate, sedentary habits, alcoholism, overeating, and other excesses. Acute attacks of the trouble may be induced by habitual constipation and the use of powerful purgatives, pregnancy, abdominal tumours, heart disease, cirrhosis of the liver, disorders of the genito-urinary system, dietetic errors (condiments and spices), excessive riding or cycling, sitting on a cold or damp seat, or intestinal worms.

SYMPTOMS.—As a rule, Nature's efforts to repair the damage are first signalled by symptoms of heat, itching, or smarting about the lower bowel. Pain and discomfort are increased by the action of the bowels. There is often also constant aching at the bottom of the back. Bleeding occurs in many cases, from a few drops up to a copious flow ending in faintness or collapse. In women, such bleeding may take place at monthly intervals. Generally there is a watery or slimy discharge as well, sometimes matter (pus). Piles may often be felt, as small and intensely tender swellings at the margin of, or protruding from, the bowel; but this is not always the case. In some sufferers part of the lining of the bowel comes down on straining at stool. The general health suffers, and there may be breathlessness, palpitation, frequent headache, emaciation, and debility. The expression is anxious and the mind depressed. Acute symptoms may cease for a time, only to return later.

COMPLICATIONS.—Weakness from repeated bleeding may favour the onset of any other malady. But the commonest complications are local inflammations of the mucous lining, also contraction and obstruction of the bowel, fistula, and cancer.

DANGEROUS TREATMENTS.—Don't take *opium* for the pain; it only makes matters worse in the long run. Do not be hurried into an *operation*. When the piles have been removed by cutting or burning, recovery is most painful and very tedious indeed. Moreover, there is nothing to prevent the development of fresh piles, a frequent occurrence.

SCIENTIFIC DIRECTIONS.—Assuage the pain of acute attacks by gentle measures of a local character. Remedy constipation, dietetic errors, and other injurious habits, so as to forestall acute attacks. Give the following, in doses

sued to the patient's constitution and condition:—*Acon.*, *Ac. fluor.*, *Aesc. hipp.*, *Arn.*, *Ars.*, *Bellad.*, *Cal. off.*, *Coff.*, *Collins.*, *Coloc.*, *Dig.*, *Ferr. mur.*, *Graph.*, *Hamam.*, *Hepar sulph.*, *Kali bichrom.*, *Nux vom.*, *Puls.*, *Sabad.*, *Sepia*, *Sulph.*, or *Verbasc.* Use baths and local applications to aid the process of cure.

CHRONIC GOUT.

Gout is, curiously enough, often looked upon as a subject for mirth by those who have never had it. Few seem to be aware that it may even be the direct and speedy cause of death.

CAUSATION.—The disease consists essentially of some damage within the body, whereby excess of uric acid and other poisonous waste-products is caused. Uric acid is a normal constituent of human blood, formed during the chemical decomposition of nitrogenous matter, and in health got rid of by the kidneys. Uric acid has a powerful affinity for soda. Consequently, if allowed to accumulate in the body, it seeks out cartilaginous and fibrous tissues, which are specially rich in soda, with which it combines to form deposits of urate of soda. Uric acid may accumulate in the body either from excessive production or defective elimination by the kidneys. Gout most commonly makes its appearance between 30 and 40. Men are much more liable than women. Geographically, gout is a malady of the colder climates, being rare in the tropics. Susceptibility to gout is often hereditary, and generally co-exists with a robust and full-blooded appearance. The wealthy and those in comfortable circumstances are more prone to contract the disease than the poor; but "poor man's gout," due to want and privation, is by no means unknown. Gout is particularly common among those who live sedentary lives, or who have special opportunities for indulgence in alcohol and nitrogenous food (butchers' meat, eggs, milk, sauces, condiments, spices, tea, coffee, and cocoa). Bright's disease, syphilis, and chronic lead-poisoning often bring gout in their train.

SYMPTOMS.—The early symptoms of gout usually escape recognition as such, but it is characteristic of early gout that sufferers "never feel quite well." There are disturbances of digestion, flatulence, heartburn, water-brash, nausea, and even vomiting. Constipation and piles are also fairly common. Some sufferers complain of shortness of breath, palpitation of the heart, headaches, and noises in the ears. Mentally the patient has fits of depression; in other cases

there is increase of the sexual appetite. Any or all of the above troubles ought to arouse suspicion.

After a time the malady passes into the second stage, in which the typical symptoms of gout, pain and swelling of the joints, appear. The feet and hands are most often affected; and the symptoms are not continuous, but take the form of repeated "gouty attacks," which are most frequent in autumn, winter, and spring. The pain is intense, and is increased by the slightest movement; and the swollen joint is hot, dusky red, and shiny. As a rule, the attack subsides in a few days. But further attacks may occur at any time; and in the intervals the patient still has the symptoms described under the first stage. Moreover, after one or more such attacks, hard lumps, known as gouty nodes, appear in the neighbourhood of affected joints, or in the cartilages of the ears, nose, etc. These are often as large as a cherry or even a fowl's egg.

The third stage is what is called *visceral gout*, in which the mischief invades important internal organs. Thus the brain, spinal cord, heart, blood-vessels, lungs, stomach, bowels, kidneys, bladder, prostate, and testicles may each and all be affected by severe inflammation and subsequent degenerative changes. The results are often serious, the weakened organs being specially susceptible to complicating maladies, and death at this stage is far from uncommon.

COMPLICATIONS.—The serious complications of gout include: spinal disease, diabetes, heart disease, hardening of the arteries, bronchitis, Bright's disease, stone in the kidney or bladder, cystitis, enlargement of the prostate, and in women metritis and vaginitis.

DANGEROUS TREATMENTS.—Routine treatment and the many patent medicines alleged to cure gout involve the use of numerous drugs and measures which merit the severest condemnation. Don't take *salicylic acid* and the *salicylates*, which raise the body temperature and give rise to distressing noises in the ears, giddiness, headache, and even fainting fits. Prolonged use of them often injures the brain, kidneys, and other organs. Beware of *colchicum*, long the accepted specific for gout. It is an irritant poison which, even in small doses, causes pain, flatulence, and diarrhoea. Large doses, or small ones long continued, produce violent vomiting and purging of blood, and slow, painful breathing. Collapse may set in, with paralysis of sensation, cold, clammy skin, and finally death. Avoid *calomel*, a drastic mercurial purgative, and *iodide of potassium*, the disadvantages of which have been mentioned under Spinal Disease. Never consent

to the use of *blisters*, which are painful and can only give temporary relief at best. Moreover, there is no little risk of absorption of the poisonous drug (*cantharides*) from which they are prepared, which is a powerful irritant to the kidneys and other urinary organs.

SCIENTIFIC DIRECTIONS.—Relieve pain and symptoms which suggest the onset of dangerous complications, selecting local measures whenever possible, and avoiding poisonous drugs. Supervise diet, use of alcohol, and other sources of further damage, but without excessive severity. Give remedies from among the following, in dilutions and doses adapted to the particular case:—*Acon.*, *Ac. fluor.*, *Arg.*, *Arn.*, *Bellad.*, *Bry. alb.*, *China*, *Coff.*, *Cupr.*, *Dulc.*, *Gels.*, *Hamam.*, *Hydrast.*, *Iod.*, *Kali bichrom.*, *Lcdum*, *Nat. mur.*, *Nux vom.*, *Op.*, *Phytol.*, *Puls.*, *Rhus tox.*, *Sepia*, *Spig.*, or *Sulph.* Employ external applications to expedite their action.

SYPHILIS.

Syphilis is a contagious malady, presenting a great variety of symptoms and subject to many serious, and occasionally fatal, complications. It may ruin your family life if neglected, but is perfectly curable provided scientific, and not drastic, treatment is resorted to.

CAUSATION.—It is now generally admitted that syphilis is due to the micro-organism, *Spirochaeta Pallida*, which has been found in nearly all the tissues and body fluids of sufferers. It is believed to produce poisons which can injure practically every part of the organism. It gains entrance through a crack or abrasion of the skin or mucous membrane. Most frequently infection is conveyed to the genital organs, as the result of immorality; but the disease may be contracted in other ways. Thus, the fingers, lips, cheeks, or other parts may be infected by contact with sufferers, or with utensils previously used by them. Finally, syphilis is hereditary in the first generation.

SYMPTOMS.—As a rule, nothing whatever is noticed till from two to four weeks after infection. A small, red, itching spot then appears at the site of infection. This gradually spreads, and in a week or ten days attains the size and shape of a flat button and becomes hard. Its surface is generally ulcerated. This is called a chancre. It is hardly ever painful, and more than one is rare. The nearest glands also become enlarged and hard (buboes), but are not painful. The chancre and the buboes constitute the first, or primary, stage of acquired syphilis.

The secondary stage begins five or six weeks later. There may be slight evening feverishness and a feeling of indisposition. A dusky, red, mottled eruption (*roscola*) appears on the skin of the chest or abdomen, often vanishing again very rapidly. About the same time sore throat may be felt, due to shallow ulcers on the tonsils. Secondary rashes next make their appearance. These may be flat or raised spots, often of a coppery tint, blisters containing fluid, pimples filled with matter, or flat patches covered with scales. Occasionally they affect similar areas on both halves of the body, and they come out in successive crops. Glands now tend to enlarge in all parts of the body, not only near the primary sore. The eyes are often affected, the coloured part (iris) being inflamed. In many cases the hair falls, either generally or in patches. Other symptoms of this stage include: pain similar to rheumatism, swollen joints, transitory deafness, and occasionally marked bodily wasting. A woman who becomes enceinte during this stage is very apt to miscarry; and this may happen repeatedly and effectually prevent family joys. On the other hand, in the comparatively rare event of a living child being born, it is afflicted with hereditary syphilis. And such a child is likely to die young; or, if it survives, never attains robust health, but probably succumbs to a spinal malady or some other complication.

After a very variable period, usually only after years, the tertiary stage supervenes. Eruptions on the skin are again typical. They are no longer symmetrical, but irregularly scattered. Spots, scales, and pimples may occur: but the most frequent is a red, thickened patch, breaking down into deep, sharply-cut ulcers. The patch spreads at its edges, and fresh ulcers form, the old ones healing and leaving ugly scars. Swellings, accompanied by severe pain, worse at night, appear on the shins, collar-bones, skull, face bones, and elsewhere; and these may break down and form abscesses. The underlying bone is destroyed and the skin falls in, leading to most unsightly and distressing disfigurements (of the nose, for example). Such bone disease is one of the commonest manifestations of tertiary syphilis. Similar growths frequently occur in important internal organs, destroying their tissues and laying the foundation for many other maladies. Death may occur from gradual exhaustion, or from complicating disease.

COMPLICATIONS.—The complications of syphilis are so numerous that it is impossible to do more than mention the most important. Nearly all are maladies accompanied by

degenerative (fibroid) changes in the tissues, of which syphilis is considered far the commonest cause. They include: neurasthenia, insanity, brain paralysis, spinal degenerations (locomotor ataxy, general paralysis), neuritis, diabetes, heart disease, artorio-sclerosis (aneurysm very common), chronic inflammation of the mouth and gums, laryngitis, bronchitis, cirrhosis of the liver, Bright's disease, orchitis and sterility, blood-poisoning, abscesses, inflammation of the eyes leading to blindness, and of the ears causing deafness, destruction and deformity of the teeth, cancer, etc., etc.

DANGEROUS TREATMENTS.—Never accept routine treatment for syphilis, for no other malady is so persistently and consistently aggravated by supposed remedies. Avoid all the usual nostrums, mercury, iodide of potassium, salvarsan, and sajodin. *Mercury*, whether given by the mouth, rubbed into the skin, or injected into the muscles, is a virulent poison, and many of the so-called complications of syphilis are, in reality, effects of chronic mercurial poisoning. Such are sore gums, Bright's disease, and other degenerations, as well as many skin troubles. The dangers of *iodide of potassium* are described under another heading. *Sajodin* is merely a newly introduced substitute for iodide of potassium. Its vogue is a tacit acknowledgment of the dangers of the more usual drug. *Salvarsan*, or "606," the latest fashionable specific, is a powerful compound of arsenic, and the latter's surprisingly quick and highly stimulating action on the skin has been known for centuries. Hence the startling "cures" of syphilis which are reported here and there. But it has been equally well known that arsenic has no permanent influence in that direction, while the deleterious effects on the organism of arsenical poisoning are notorious. Death has on many occasions followed the injection of salvarsan.

SCIENTIFIC DIRECTIONS.—Alleviate, by very gentle means, symptoms which threaten danger or permanent disfigurement. Check alcoholic excesses and other errors apt to intensify the damage. Order baths and other appropriate external treatment. And give *Acon.*, *Ac. fluor.*, *Ant. tart.*, *Apis mell.*, *Arg.*, *Arn.*, *Ars.*, *Bapt.*, *Bar. carb.*, *Bellad.*, *Borax*, *Calc. carb.*, *Canth.*, *Carb. veg.*, *China*, *Cocc. ind.*, *Dig.*, *Dulc.*, *Graph.*, *Hamam.*, *Hepar sulph.*, *Iod.*, *Ipec.*, *Iris vers.*, *Kali bichrom.*, *Kreasot.*, *Lcdum.*, *Lycopod.*, *Nat. mur.*, *Op.*, *Petrol.*, *Phosph.*, *Phytol.*, *Podoph.*, *Puls.*, *Rhus tox.*, *Sepia*, *Silic.*, *Staphis.*, *Spong.*, *Sulph.*, or *Thuja occ.*, varying the dilutions and doses to suit the requirements of each case.

CANCER AND OTHER TUMOURS.

It is needless to dwell on the seriousness of cancer, for its grim terrors are familiar to all.

CAUSATION.—The disease is accompanied by an enormous multiplication of cells naturally present in the body, causing the formation of masses which invade and destroy healthy tissues. How and why this overgrowth occurs is still under discussion. The parts most frequently attacked include: the lip, tongue, stomach, lower bowel, female breast, and the reproductive organs of both sexes. Cancer is in the main a malady of middle and old age. Both men and women are liable. A tendency to develop tumours is, beyond question, very often hereditary. The disease is said to be more common in large towns than in rural districts, and the West of England suffers more than the East and the Midlands. Depressing maladies and mental emotions favour the onset of the malady. But whatever may have induced susceptibility, a tumour rarely develops without some form of local damage to the tissues. Thus, it may follow a blow or other injury, but far more often results from long-continued irritation. In the former case years may elapse before the malady shows itself.

SYMPTOMS.—Commonly the earliest indication of the trouble is the appearance in some part of the body of a lump or swelling. This, when first noticed, is generally small and hard. Subsequently it grows, often very rapidly. The tumour is rarely painful at first, in some situations never at all. But, as a rule, pain begins after a time and gets gradually worse until the agony becomes almost unbearable. Sometimes, especially if the growth is internal, pain is the first symptom observed. Sooner or later some part of the tumour breaks down and ulcerates, forming an open sore with a constant, foul and bloodstained discharge: but all this may escape notice if the tumour is internal. The nearest glands are always enlarged. Other symptoms depend mainly on the organ implicated. In cancer of the stomach, for example, there is vomiting. Bodily weakness and wasting always occur, and the sufferer becomes of a curious, earthy complexion. Wherever the primary growth, secondary tumours commonly develop elsewhere, the lungs and bones being very common sites of such secondary growths. These weaken the sufferer still more, so that, even if he escapes complications, he dies from exhaustion, only too often after a long period of indescribable torment.

COMPLICATIONS.—Tumours are very apt to cause inflammation and degeneration of the organ they attack, and

thus may be complicated by almost all of the maladies described under other headings.

DANGEROUS TREATMENT.—Don't be led away by the modern craze for *operation*, which is so often followed by relapse and death.

SCIENTIFIC DIRECTIONS.—Soothe the pain as much as possible, without employing drastic, poisonous drugs. Prevent local irritation, which often determines the formation of a tumour. Give small doses of: *Acon.*, *Ac. fluor.*, *Apis mell.*, *Bar. carb.*, *Borax*, *Bry. alb.*, *Cale. carb.*, *Canth.*, *Caps.*, *Carb. veg.*, *China*, *Ferr. mur.*, *Graph.*, *Hamam.*, *Hepar sulph.*, *Hydrast.*, *Iod.*, *Kali bichrom.*, *Kreasot.*, *Lycopod.*, *Nat. mur.*, *Op.*, *Phosph.*, *Phytol.*, *Sepia.*, *Silic.*, *Spong.*, *Sulph.*, or *Thuja occ.* Use outward applications also, when indicated.

ECZEMA AND OTHER CHRONIC DISORDERS OF THE SKIN.

Disorders of the skin are among the most distressing of all human ailments. For nothing torments the mind more than an unsightly disfigurement of the face or body.

CAUSATION.—The disease is some kind of damage to the skin, produced by an external or, very frequently, by an internal irritant. These maladies occur at all ages and in both sexes. They are, beyond question, often hereditary; and they are more frequent in cold, damp climates. Persons who follow certain occupations, such as stokers, blacksmiths, cooks, bakers, grocers, and cabinet makers, are specially liable to skin troubles. Conditions which increase liability to skin disorders are neurasthenia and varicose veins. Many maladies also induce skin disorders. These include: gastritis, colitis, gout, diabetes, Bright's disease, syphilis, metritis, and vaginitis. The discharges in the last two irritate the skin; and other agents which act in a similar manner are: rough clothing, parasites, prolonged pressure, strong soap, antimony, arsenic, croton oil, copaiba, sulphur, bromide of potassium, mercury, cantharides, salicylic acid, chrysarobin, and many other drugs and chemicals.

SYMPTOMS.—The main symptom is tingling, itching, or burning of the skin; rarely there is severe neuralgic pain. Soon appears the characteristic eruption, and this varies very widely in different cases. Sometimes it is a mere general redness (*erythema*). Or there may be round, red, raised spots (*papular eczema*, *lichen*), small blisters containing clear fluid (*herpes* or *shingles*), pointed pimples, many of which contain matter (*acne*), or large blebs or blisters (*vesicular eczema*, *pemphigus*). Very commonly there are large, round or irregular, red patches, which may discharge

(weeping eczema), or may be covered with crusts and thin scales (dry or scaly eczema), or with thick, silvery-white scales (psoriasis). These eruptions may affect any part of the body. The intervening skin is sometimes swollen. The discharge, if present, is usually yellowish, and may be offensive, and stain the linen.

COMPLICATIONS.—Complications sometimes ensue, the most important being general blood-poisoning, rapidly followed by death. And the constant bodily and mental irritation has been known to culminate in melancholic insanity, or even suicide.

DANGEROUS TREATMENTS.—Reject everything but the very mildest treatment. Drastic measures often only aggravate the trouble. Therefore avoid customary doses of *arsenic*, *antimony*, *sulphur*, *turpentine*, *pilocarpine*, and *thyroid extract*; and do not use ointments, lotions, or dressings which contain *tar*, *nitrate of silver*, *permanganate of potash*, *mercury*, *iodoform*, *sulphur*, *acetate of lead*, *chrysarobin*, *salicylic acid*, *zinc*, *picric acid*, or *pyrogallie acid*, except in the minutest proportions. And do not countenance blistering, which is brutal and useless.

SCIENTIFIC DIRECTIONS.—Allay irritation, and pain if present, by the mildest external applications. Eliminate sources of irritation, which aggravate the trouble. Select internal and external remedies from the following list:—*Ac. fluor.*, *Ac. phosph.*, *Agar. musc.*, *Ant. tart.*, *Apis mell.*, *Arn.*, *Ars.*, *Bellad.*, *Borax*, *Canth.*, *Carb. veg.*, *Coloc.*, *Dulc.*, *Graph.*, *Hamam.*, *Hepar sulph.*, *Iod.*, *Ipec.*, *Iris vers.*, *Kreasol.*, *Ledum*, *Lycodod.*, *Nat. mur.*, *Op.*, *Petrol.*, *Phytol.*, *Puls.*, *Rhus tox.*, *Sabad.*, *Silic.*, *Staphis.*, and *Sulph.*

CHRONIC STOMATITIS, TONSILLITIS, AND LARYNGITIS.

Under this heading are included inflammatory ailments of the mouth, throat, and upper air-passages, which frequently give rise to much pain and inconvenience.

CAUSATION.—The disease in each of these maladies is due, as a rule, to the incursion of micro-organisms into the mucous lining of the mouth, tonsils, or larynx (the organ of voice, situated at the top of the windpipe), but physical irritants are, no doubt, often to blame. The maladies occur in both sexes and at all ages. They are very apt to attack persons who make great use of the voice, such as clergymen, school teachers, auctioneers, street hawkers, and the like. General debility, exposure to cold, irritating dust or vapour, constant smoking, and certain poisons, such as mercury, lead, arsenic, and alcohol, favour these complaints, as well

as many specific micro-organisms, particularly those of tuberculosis, syphilis, measles, diphtheria, typhoid fever, and other acute infectious maladies.

SYMPTOMS.—Symptoms vary with the situation of the mischief. There may be dryness, irritability, or soreness of the mouth, tongue, or gums, sore throat, or hoarseness. Later, mastication may be painful and swallowing difficult. Irritable cough, with slight expectoration, is common. In severe cases the voice may be entirely lost for a time; or the throat becomes excessively painful and swollen, ending in the formation of an abscess. The sufferer feels on the point of suffocation, but ultimately the contents of the abscess escape, and relief follows until a fresh attack ensues. It is characteristic of many sufferers from these complaints that they cannot breathe through the nose, and, consequently, always have the mouth open, speak indistinctly, and snore when asleep. Occasionally, in very bad or neglected cases, matter, and even portions of the cartilages of the larynx are coughed up, and loss of voice becomes permanent.

COMPLICATIONS.—The diseased tissues of the mouth and neighbouring parts afford a very favourable site for the growth and development of micro-organisms. Hence the complications to be feared are maladies due to microbic infection, particularly rheumatic fever and maladies of the lungs. Deafness also often results.

DANGEROUS TREATMENTS.—Avoid *blistering*, *leeching*, and *surgical operations* directed against the tonsils, the uvula, or other parts. Such violent measures are not justified.

SCIENTIFIC DIRECTIONS.—Relieve pain and discomfort, if pronounced, by extremely gentle measures. Ensure rest for the voice and avoidance of exposure, over-smoking, and other injurious influences, but with the minimum disturbance of the patient's customary routine. Give the following, in appropriate dilutions and doses, supplemented by very mild local measures:—*Acon.*, *Ac. fluor.*, *Ant. tart.*, *Apis mell.*, *Arg.*, *Ars.*, *Bapt.*, *Bellad.*, *Borax*, *Bry. alb.*, *Calc. carb.*, *Caps.*, *Carb. veg.*, *China*, *Dros.*, *Dulc.*, *Gels.*, *Hamam.*, *Hepar sulph.*, *Hydrast.*, *Hyos.*, *Iod.*, *Ipec.*, *Kreosot.*, *Nat. mur.*, *Op.*, *Podoph.*, *Rhus tox.*, *Sabad.*, *Spong.*, or *Tabac.*

CHRONIC BRONCHITIS AND ASTHMA.

In this country no complaint is more common than bronchitis. Though very often a complication of some other malady, bronchitis frequently occurs alone. And one of its most serious aspects is the frequency with which it opens the way to other fatal maladies.

CAUSATION.—The disease is some damage to the bronchi (the tubes which convey air into the lungs), due to micro-organisms or other (organic and inorganic) irritating matter. In asthma, which never occurs without bronchitis, the bronchi are further spasmodically narrowed by the faulty action of their nerves, thus obstructing the entry of air.

Bronchitis is a malady of the temperate zones, most prevalent where the climate is moist and changeable. Infants, children and the elderly suffer most, young adults but rarely. The sexes are equally affected, except at the working period of life, when the male sex, being more exposed to the weather, preponderates. Poverty, insufficient warmth, and scanty food are very favourable to bronchitis; so, on the other hand, are luxurious habits, over-heated rooms, and undue wrapping up. Impure air makes the malady commoner in town-dwellers, and even among these outdoor workers suffer least. Susceptibility to bronchitis is often acquired as one of the results of intemperance. In many instances stimulants have been taken for years as antidotes to cold and wet. Hence carmen, cabdrivers, street hawkers, and the like are frequent sufferers, whilst miners, weavers, grinders, and others become liable to bronchitis through constantly inhaling fine dust. Many old sufferers from bronchitis develop emphysema, that is, rigidity of the chest and distension of the lungs. The latter are then peculiarly vulnerable to disease, and thus emphysema in its turn engenders bronchitis, and a vicious cycle is established. Many drugs set up bronchitis, among which may be mentioned ammonia and its compounds, iodide of potassium, mercury, etc. Lastly, many other maladies precede bronchitis. These include: influenza, pleurisy, measles, typhoid fever, diphtheria, whooping-cough, smallpox, heart disease, arteriosclerosis, aneurysm, rickets, phthisis, Bright's disease, gout, and cancer.

SYMPTOMS.—The early symptoms are the familiar ones commonly known as a "cold on the chest." A sense of tightness and discomfort in the chest and throat is followed by attacks of moderately severe coughing, and possibly slight shortness of breath. Expectoration may be abundant, thin, yellowish, and easily brought up, or white, frothy, and difficult to expel. Commonly such symptoms are thought to be of little importance, but if they persist, even in a mild form, for weeks or months, they ought not to be lightly regarded.

After a time the cough becomes more severe, and almost constant except in the warm summer months, when it may

nearly or quite disappear. Usually it is most troublesome in the night or early morning; and the expectoration tends to become thicker and more yellow. The breath is short, especially on exertion; the appetite is poor, the tongue coated, digestion bad, and the bowels confined; and weight and strength diminish. Many such sufferers continue their avocations with a struggle, but they never feel really well. Often, perhaps after a day or two of general indisposition, or, possibly, without any warning, the sufferer suddenly grows feverish, his temperature rising two or three degrees. He feels very ill, and has to stay in bed. His chest is sore and painful, his cough constant and racking. At first there is no expectoration, afterwards a little, whitish and frothy. Appetite fails completely and the bowels are constipated. Sometimes the patient, particularly if very young or very old, grows steadily weaker. He loses the power to cough; breathing becomes more and more rapid and laboured; the skin is cold, clammy, and livid, or even blue; the pulse quick and feeble. Finally dropsy sets in, there may be delirium, coma, or convulsions, and the patient dies suffocated.

Many victims of bronchitis have attacks of asthma. These commence suddenly, often in the night. The patient wakes, gasping for breath, and possibly opens the window to admit air. Breathing gets more and more difficult, and is marked by a loud wheezing. The face becomes blue, the eyes protruding and blood-shot, and the sufferer holds on to fixed objects in the effort to get breath. After a time, minutes or hours, he begins to cough, brings up some expectoration, and by degrees breathes more easily till everything seems normal again. These bouts recur at varying intervals in different individuals.

In the later stages of bronchitis the sufferer is usually a confirmed invalid, with all the signs of premature decay. He is feeble, wasted, wrinkled, and blue, and too breathless for any exertion. Dropsy often supervenes, and finally he dies from exhaustion, or from some complication.

COMPLICATIONS.—Emphysema is the commonest complications. Others are dilatation of the air passages (*bronchiectasis*), foetid bronchitis, with horribly offensive discharges, plastic bronchitis, in which casts of the air tubes are brought up, acute and chronic pneumonia, consumption, dilatation and actual disease of the heart, measles, scarlet fever, and other acute maladies.

DANGEROUS TREATMENTS.—Beware of *opium* and *morphine* as usually given. By paralysing sensory nerves, they allay

the irritation which provokes cough. In other words, they forcibly obstruct Nature's curative efforts. Don't take *ammonia*, *ether*, *squill*, *senega*, *ipécacuanha*, *iodide of potassium*, and other "expectorants" in large doses. These are rational remedies, because they encourage cough. But they are invariably given far too drastically, and many increase the amount of expectoration, thus adding to, rather than aiding, Nature's task. For *digitalis*, *strophanthus*, and *strychnine*, see Graves' Disease and Spinal Disease. Remember that *tonics*, in this as in most maladies, are merely a confession of medical impotence. Don't trust merely to *change of air*. Comfort and freedom from chills are more easily ensured at home.

SCIENTIFIC DIRECTIONS.—Ease pain, cough and breathlessness without resort to heroic methods. Prevent aggravation of the malady, by judicious supervision of the sufferer's life, work, and habits. Order suitable external and local applications, and give such of the following medicaments as the symptoms indicate:—*Acon.*, *Ant. tart.*, *Arg.*, *Ars.*, *Bellad.*, *Bry. alb.*, *Camph.*, *Canth.*, *Carb. veg.*, *China*, *Coff.*, *Dros.*, *Dulc.*, *Ferr. mur.*, *Hepar sulph.*, *Hyos.*, *Iod.*, *Ipec.*, *Nat. mur.*, *Nux. vom.*, *Op.*, *Petrol.*, *Phosph.*, *Rhus tox.*, *Sabad.*, *Staphis.*, *Spong.*, *Tabac.*, *Veratr. vir.*, or *Verbas.*

CONSUMPTION.

[Phthisis, Pulmonary Tuberculosis.]

Consumption has well been called "the white man's scourge." For it has been shown to be responsible for no less than one-thirteenth of the world's total death-rate; and there can be no question that the civilised white races of Europe and America endure the worst of its ravages.

CAUSATION.—Consumption cannot occur unless the lung is infected by the tubercle bacillus, which, directly or indirectly, is invariably derived from a subject already infected. No inhabited portion of the earth's surface is free from consumption, but it is apt to be more prevalent where the soil is moist. And all races are equally subject to the malady, its greater incidence on white peoples being due solely to density of population. It is rare, but not unknown, in infancy and advanced age. Between 5 and 20, females are more liable to consumption than males; at all other ages males suffer most. Heredity and a consumptive "diathesis" (individual susceptibility) no doubt play a part, but, as already indicated, by far the most important factor in spreading the malady is over-crowding. Hence the poor, particularly in large towns, fall easy victims, their

liability being heightened by lack of adequate food, warmth and sanitation. But no class, not even the wealthiest, is exempt. Indoor and sedentary occupations also have an evil influence; and so does constant irritation of the lungs by the inhalation of dust, in such trades as mining, flint working, file-cutting, needle-making, grinding, and pottery. Alcoholic and sexual indulgences undoubtedly favour the malady. Lastly, consumption is very prone to follow certain maladies, the most important of which are diabetes, insanity, measles, bronchitis, pneumonia, whooping-cough, scarlet fever, and tuberculosis in other organs. For the specific micro-organism of the disease is so ubiquitous that it rarely fails to take advantage of favourable conditions.

SYMPTOMS.—Much the commonest form of early symptoms is a series of "colds" closely following each other, usually marked by a little bronchitis, very occasionally by asthma. Irritable stomach is also frequent, with failing appetite, flatulence, and nausea. Or there may be pain in the side, weakness, anæmia, and palpitations, or alternating feverishness, chills, and sweating, resembling attacks of ague.

In the second stage, two symptoms are always present, fever and cough. The fever is characteristic, the temperature being raised one, two, or more degrees every evening and falling again during the night. Cough, at first easy and infrequent, later becomes painful and nearly incessant. Expectoration follows, clear and frothy at first, but becoming thicker and more copious. Spitting of blood also occurs—in most cases a mere tinge, more abundant at intervals; but sometimes free bleeding from the lungs is the first sign to attract attention. Pain in the side is more severe, and there may be shortness of breath, aggravated by exertion. Now, too, begin the characteristic night-sweats, the sufferer waking repeatedly, bathed in cold perspiration. Meanwhile, weakness and anæmia increase, and the body steadily wastes. The skin is dry and harsh, the pulse rapid, and the face livid, purple, or blue.

After a time, which varies from a few weeks to several years, the patient lapses into the final stage. Reduced now to a skeleton, and too weak to rise, he lies in bed breathless, drenched with perspiration, and coughing ceaselessly. The mere thought of food is loathsome to him, and his debility is further increased by frequent and profuse diarrhoea, often accompanied by blood. At any time now there may be a sudden great rise of temperature, with shivering, foul tongue, headache, and severe pain in the chest. Breathless-

ness becomes extreme and cough continual; the sufferer grows rapidly worse, and dies in a few days or, at most, three or four weeks. Such a course is spoken of as acute or "galloping" consumption. But, generally, death occurs from gradual exhaustion, or from collapse following severe bleeding from the lungs.

COMPLICATIONS.—Consumption generally kills unaided, and complications are comparatively rare. Bronchitis, nearly always present, may assume the "acute" form and prove rapidly fatal. Or tuberculosis may invade other organs, giving rise to pleurisy, peritonitis, meningitis (delirium, coma, and death), etc.

DANGEROUS TREATMENTS.—Don't be put off with *tonics*. You may feel better at first, but will be worse in the end. Do not submit to *inoculations* with *tuberculin* or similar preparations. That they ever cure is open to doubt, that they may kill is not. Neither allow yourself to be experimented on with *urea*. Refuse large doses of *opium*, *morphins*, and *heroin*e. These drugs suppress cough, and prevent necessary expectoration. Don't ruin your digestion and destroy your appetite by the "stuffing" enforced as *dietetic treatment*; while any hopes set merely upon the *open-air treatment* are futile, as proved by true statistics.

SCIENTIFIC DIRECTIONS.—Relieve distressing cough, night-sweats, insomnia, and pain if present, by mild measures which cannot do harm. Plan diet and exercise very carefully, without over-feeding or fatigue. Avoid chills, shocks, and excitement. Give the following homœopathic remedies in doses fitted to the patient's condition, aiding their action by local applications:—*Acon.*, *Ant. tart.*, *Arg.*, *Arn.*, *Ars.*, *Bellad.*, *Bry. alb.*, *Calc. carb.*, *Carb. veg.*, *China*, *Coff.*, *Dros.*, *Dulc.*, *Ferr. mur.*, *Hamam.*, *Hepar sulph.*, *Hyos.*, *Iod.*, *Ipec.*, *Kali bichrom.*, *Kreasol.*, *Nat. mur.*, *Nux vom.*, *Op.*, *Petrol.*, *Phosph.*, *Rhus tox.*, *Scpia*, *Staphis.*, *Spong.*, *Sulph.*, *Tabac.*, *Veratr. vir.*, or *Verbasc.*

CHRONIC BRIGHT'S DISEASE.

This common malady is the cause of many deaths. It is often declared to be incurable, and this erroneous teaching, by discouraging efficient treatment, is directly responsible for much preventible suffering and premature loss of life.

CAUSATION.—The disease itself is damage to the tissues of the kidneys, which, in the course of the malady, may fail to discharge their functions. Waste-products of the body are retained in the blood and poison the system gradually. Bright's disease is commonest in temperate climates, and

occurs most frequently in adults. Men are more liable to the malady than women, although pregnancy is sometimes the cause. Bright's disease has been traced through four generations in the same family. Trades involving exposure to sudden alternations of heat and cold, such as bakers, furnace-men, stokers, and glass-blowers, entail great risk of Bright's disease. Chills have long been considered responsible for many cases, though some modern pathologists deny this. Many poisons, in large doses, are capable of inflicting the disease. They include: alcohol, lead, mercury, arsenic, turpentine, and cantharides, all of which are orthodox medicines or may be absorbed in other ways. Bright's disease also follows a great many maladies, such as scarlet fever, diphtheria, measles, mumps, erysipelas, typhoid fever, chicken-pox, rheumatism, heart disease, arterio-sclerosis, gout, diabetes, syphilis, tuberculosis, cancer, stone in the kidney, cystitis, and prostatitis.

SYMPTOMS.—The earliest symptoms very frequently entirely escape notice. Grave suspicion should be aroused by the necessity to rise and pass water at night, and by puffiness of the face (dropsy), particularly round the eyes, on waking. Very occasionally dropsy appears first in the legs or some other part. Intermittent pain in the loins (lumbago) is very suggestive of Bright's disease. Other symptoms may accompany or precede these, such as depression, lassitude, pallor, headache, disturbances of digestion, nausea and vomiting, constipation alternating with diarrhoea, and loss of flesh. Wasting, though considerable, may be hidden by dropsy, body and limbs being swollen to unwieldiness and features unrecognisable. Many sufferers look robust to casual glance, but their ruddy faces have a bluish tinge, and their distress on movement reveals the truth. Palpitation and shortness of breath, increased by the slightest exertion, prevent proper sleep. The urine is generally scanty and, if a urine-analysis is made, albumen is generally found to be present, and sometimes blood as well. The pulse is hard and the arteries rigid, and bleeding may occur from the nose, lungs, or stomach, as well as from the kidneys. Now and then, too, the patient is extremely apt to contract one or more of the complicating maladies, which will end his life.

Where nothing is done to expel the disease and prevent aggravating influences, symptoms of the second stage soon develop. Sometimes these pursue a rapid and violent course, and if the first stage has been overlooked, the case is said to be one of "acute Bright's disease." After a shivering fit or, in a child, convulsions, or possibly without any warning

the face is suddenly found to be very swollen, and the water scanty, highly albuminous, and perhaps bloody. The sufferer is quickly prostrated and feels very ill. Dropsy spreads and increases, and there is usually some fever and breathlessness. In a few days, or at most weeks, the symptoms may gradually subside for a time. Or else the patient may very rapidly pass into the third, the fatal, stage.

This is known as *uræmia*, on the assumption that it is due to retention in the blood of urea and other waste-products. Usually it is ushered in by drowsiness, and this is succeeded by more or less stupor. Urine is rapidly diminished in quantity, or even entirely suppressed, and albumen may cease to appear. The breathing is extremely laboured, and headache intense. There may be sudden blindness, or paralysis of the face or one limb. Hiccough and severe diarrhoea are common. Delirium may set in; but more generally drowsiness gradually deepens into coma, which is interrupted by distressing convulsions, coma and convulsions alternating till death ensues.

COMPLICATIONS.—The complications of Bright's disease are numerous. Arterio-sclerosis nearly always develops, if not previously present. Apoplexy, paralysis, and other brain troubles are very prone to occur. The heart, always seriously hampered, often becomes diseased in consequence. The lungs are liable to bronchitis, pneumonia, and pleurisy. The optic nerves in the eyes degenerate, causing failure of sight and even complete blindness. And the skin is frequently attacked by erysipelas, erythema, eczema, and other eruptions.

DANGEROUS TREATMENTS.—Exponents of official medicine have expended much labour and ingenuity in investigating and classifying the varieties of damage observed in the dead body, but none of their refinements have led to real improvements in treatment. Remember continual *purgation* may permanently injure the bowel, and *mercury*, often given for this purpose, promotes kidney degeneration. Avoid usual doses of *digitalis*, already referred to (see Graves' disease), and *caffeine*. The latter may cause piles, and sometimes checks the flow of urine. Beware of *jaborandi* and *filocarpine*, for these powerful poisons may even cause death. Don't submit to an *exclusive milk diet*; its only certain result is increased weakness. Avoid *hot baths* and *vapour baths*, for they increase the strain on the heart. Bear in mind that *change of air* involves travelling, and victims of Bright's disease are very bad travellers.

SCIENTIFIC DIRECTIONS.—Avert risk of death, and ease

pain if present, but be careful not to employ drastic methods. Correct hygienic errors, which may cause further injury, but without officious interference. Give the following in such dilutions and doses as are most expedient:—*Acon.*, *Apis mell.*, *Arg.*, *Ars.*, *Bellad.*, *Canth.*, *Coff.*, *Collins.*, *Cupr.*, *Dig.*, *Dulc.*, *Ferr. mur.*, *Gels.*, *Hydrast.*, *Hyos.*, *Ign. am.*, *Iod.*, *Kali bichrom.*, *Kreasot.*, *Lupul.*, *Lycopod.*, *Nat. mur.*, *Nuxvom.*, *Op.*, *Phosph.*, *Phytol.*, *Sepia*, *Thuja occ.*, *Valer.*, or *Verbasc.* In addition, make use of external applications of a mild type.

MOVABLE KIDNEY.

[**Floating Kidney, Dropped Kidney, Nephroptosis.**]

Movable kidney, at the present time, gives rise to much mistaken treatment, which neither relieves nor cures. There is a tendency to ascribe neurasthenia and other maladies to movable kidney is to be deprecated.

CAUSATION.—The actual disease is abnormal mobility of the kidney. Dietl's Crises (see below) are believed to be due to temporary kinking or twisting of the ureter and blood vessels, near their attachment to the kidney. The trouble may occur at any age, but is commonest between 30 and 50, though a few cases seem to date from birth. It affects women much more often than men. Nervous disposition, emaciation, oft-repeated pregnancy, and too frequent warm bathing are said to encourage undue mobility of the kidney. Tight lacing is, perhaps, the most frequent cause. Others are blows, falls, carrying weights on the back, the jolting of carriage exercise, and the strain of violent coughing or vomiting, or of difficult child-birth.

SYMPTOMS.—The right kidney is affected far more frequently than the left, presumably because, in health, it is less firmly bound down than its fellow. Commonly the first symptom is weight or dragging pain in the loin. This may be increased by walking or any exertion and relieved by lying down. Usually the pain is much worse during the monthly periods. Soon digestive disturbances supervene. There is flatulence, pain in the stomach, nausea, vomiting, and, as a rule, obstinate constipation. Headaches are common, and the mind is generally nervous, depressed, irritable, and anxious. From time to time occur sudden attacks of agonising pain in the kidney region, accompanied by great tenderness on pressure. The abdomen is distended, the pulse small, the skin cold and clammy. Giddiness, faintness, and vomiting often follow; and there may even be delirium. The urine may be scanty and of a dark colour, and is sometimes bloody. These symptoms, which closely resemble collapse

and are known as Dietl's Crises, subside in a few days, but may recur again and again.

The usual course is for symptoms to continue unchanged for an indefinite period, unless complications arise.

COMPLICATIONS.—Dilated stomach (see Gastritis) is a very frequent complication, and others which may occur include: hydronephrosis (distension of the kidney with water), tubercle and cancer of, and stone in, the kidney.

DANGEROUS TREATMENTS.—Don't submit to *operation* for fixing the kidney. It is dangerous, it may fail, and even if successful, often leaves the sufferer's symptoms very much where they were before. Do not wear complicated *kidney belts*, which cause perpetual heat and inconvenience, and rightly deserve to be called "a remedy worse than the disease."

SCIENTIFIC DIRECTIONS.—Assuage pain and distress, if necessary, by an extremely simple abdominal belt or other gentle means. Rectify errors of clothing, diet, exercise, and similar aggravating circumstances. Give homœopathic doses of: *Acon.*, *Agar. musc.*, *Ant. tart.*, *Bellad.*, *Bry. alb.*, *Canth.*, *Cham.*, *China*, *Cimic.*, *Coff.*, *Cupr.*, *Ferr. mur.*, *Gels.*, *Glon.*, *Graph.*, *Hydrast.*, *Ign. am.*, *Iod.*, *Lupul.*, *Nux. vom.*, *Phosph.*, *Plat.*, *Puls.*, *Rhus tox.*, *Silic.*, *Valer.*, or *Veratr.*

URINARY CALCULUS.

[Stone in the Kidney (Nephrolithiasis) or Bladder (Cystolithiasis.)]

This malady causes intense suffering, and often death. Moreover, it is one of the favourite fields of the operating surgeon, whose interference not rarely hastens the fatal termination.

CAUSATION.—The essential disease is probably situated in the kidneys, and occasions an excess of the solid constituents of the urine. These are deposited as fine crystals, which may be passed (gravel, urinary sediment) or may combine to form stones, either in the kidney or in the bladder. Calculous maladies occur in all parts of the world, but are specially prevalent in the eastern counties of England, in India, and in Egypt. They are commonest in the elderly, and the well-to-do provide most victims. Males suffer far more often than females. Injurious influences favouring the formation of stone include: the so-called uric acid diathesis, gout, excessive use of animal food or alcohol, general debility, and every kind of inflammation or irritation of the urinary organs, such as Bright's disease, cystitis, prostatitis, urethritis, and the presence of foreign bodies.

SYMPTOMS.—The earliest indication that Nature is trying to get rid of the disease is the appearance of a sediment in the urine. This may be red, pink, brick-dust colour, fawn, yellow, or even white, when it may be entirely overlooked. If seen it should always be looked upon as a danger-signal. Generally the next symptom is increased frequency of micturition, most marked after exercise, not at night. Pain follows, and varies greatly according to the site, size, and character of the stones. A constant dull aching in the loins is the commonest; but there may be pain in the lower part of the abdomen, around the back passage, at the end of the male organ, or down one or both thighs. Blood is passed in some cases, either mixed with the urine (from the kidney) or towards the end of urination (from the bladder). These three symptoms sometimes constitute the whole malady; but, as a rule, the sufferer gradually becomes weak and despondent. In a number of cases what is known as *renal colic* occurs from time to time. This consists of sudden paroxysms of excruciating pain, running from the kidney region down to the lower abdomen, the genital organs, and often the thigh. The patient is covered with a cold sweat, and nausea, vomiting, or fainting may occur. Urination is frequent and painful, but only a few drops are passed at a time. After pain ceases, fragments of stone may be passed with the water, usually accompanied by blood, and by pain in the urethra.

COMPLICATIONS.—Among the complications are: impaction of a stone, with sudden stoppage of the stream of urine, Bright's disease, tuberculosis and cancer of the urinary organs, cystitis, prostatitis, and complete suppression of urine leading to uræmia and death.

DANGEROUS TREATMENTS.—For *opium* and *morphine* see Prostatitis. Avoid *operations*. In most cases they are quite unnecessary; and remember that something like 50 per cent. end fatally.

SCIENTIFIC DIRECTIONS.—Relieve the pain of renal colic, and check the tendency to collapse, but use only harmless methods. Prevent alcoholic excess, errors of diet, etc., without being needlessly severe. Give the under-mentioned medicaments, in doses and dilutions to fit the case:—*Acon.*, *Arg.*, *Ars.*, *Bellad.*, *Camph.*, *Canth.*, *Cham.*, *China*, *Coff.*, *Cupr.*, *Dulc.*, *Ferr. mur.*, *Gels.*, *Hamam.*, *Hepar sulph.*, *Hydrast.*, *Kreosot.*, *Lupul.*, *Lycopod.*, *Nux vom.*, *Op.*, *Phosph.*, *Puls.*, *Sepia.*, *Staphis.*, or *Veratr. alb.* Supplement medicinal by local treatment.

CHRONIC CYSTITIS.

[Inflammation of the Bladder.]

This distressing, and frequently fatal, complaint is not incurable, though, on account of the comparative inaccessibility of the affected organ, treatment is sometimes lengthy.

CAUSATION.—The actual disease is incursion of micro-organisms into the mucous lining of the bladder. Cystitis may occur at any age, but its frequency increases with advancing years. It is rarer, and more easily cured, in females than in males. It often attacks sufferers from some other malady, generally one which involves long confinement to bed. The principal maladies which thus lead to cystitis are gonorrhœa, prostatitis, and spinal paralysis; but cystitis may also follow typhoid fever, tuberculosis, ulcers, new growths, such as cancer, stone in the bladder, gravel, or excessive acidity or alkalinity of the urine. Exposure to cold and damp is sometimes blamed, and the malady may follow alcoholic excess, direct injury, or the taking of such drugs as *copaiba*, turpentine, and cantharides. Lastly, in women, cystitis sometimes results from the accidents of childbirth.

SYMPTOMS.—The first symptom is cloudiness of the urine, due to the presence of pus (matter). Or the water may contain quantities ofropy slime (mucus). Rarely it is tinged with blood. After, or occasionally before this, increased frequency of urination becomes troublesome. Pain follows: either a constant dull aching about the groin, or severe pain when passing water. The latter is usually situated in the perinæum (near the orifice of the bowel), the end of urination being often followed by agonising spasms lasting many minutes. The water is generally alkaline and foul. Symptoms become progressively worse, and in the end the sufferer succumbs from exhaustion, or from complications.

COMPLICATIONS.—The most dangerous complication is infection of the kidneys, which almost invariably means death from blood-poisoning. Stone in the bladder may be a consequence instead of a cause of cystitis, and so also may prostatitis. In some cases the bladder wall becomes enormously thickened (hypertrophy) and its cavity greatly diminished, leading to inability to hold the water. Abscess may form in the bladder. In rare cases the organ may also rupture, with rapidly fatal results.

DANGEROUS TREATMENTS.—Do not take *turpentine*, *copaiba*, or *urotropine*, for they irritate both the stomach and the urinary organs. Avoid *opium* in orthodox doses; it

gives present relief at the expense of future suffering. Don't permit *washing out the bladder*. The strong antiseptics employed for the purpose irritate the sensitive mucous membrane, and the instruments may be the means of introducing further micro-organisms. Refuse *operations* for draining the bladder; they involve immediate risk and subsequent great discomfort.

SCIENTIFIC DIRECTIONS.—Ease pain and diminish frequency of urination, by the gentlest measures available. Judiciously moderate faults of living liable to lead to further mischief. Order baths and other helpful outward applications. Give appropriate doses of *Acon.*, *Ac. fluor.*, *Ars.*, *Bellad.*, *Borax*, *Calc. carb.*, *Camph.*, *Canth.*, *Carb. veg.*, *China*, *Cupr.*, *Dulc.*, *Ferr. mur.*, *Gels.*, *Hepar sulph.*, *Hydrast.*, *Hyos.*, *Kreasot.*, *Lupul.*, *Lycopod.*, *Nux vom.*, *Op.*, *Puls.*, *Sepia*, *Staphis.*, *Sulph.*, or *Verbasc.*

CHRONIC PROSTATITIS.

This malady is far more common than is often imagined, and the constant suffering and debility it occasions frequently make life a burden.

CAUSATION.—The disease itself is probably due to the invasion by micro-organisms of the sensitive prostate gland, which is situated at the base of the bladder, and when of long standing this organ may be greatly enlarged. Prostatitis is a malady which affects young no less than old men, and is found in all ranks of society. Alcoholic and sexual excesses and vicious habits, cystitis (which see), stone in the bladder, tumours, the jarring due to riding or cycling, injury (particularly by surgical instruments), irritant drugs (like cantharides), and certain maladies, such as typhus fever, mumps, pneumonia, and blood-poisoning, all damage the prostate gland and facilitate the entry of micro-organisms. But prostatitis may occur without any of these, for neglected and badly treated gonorrhœas probably account for more than half of all cases. Occasionally the trouble is cancerous from the outset.

SYMPTOMS.—The first abnormality noticed is the escape of a little fluid (prostatic secretion) from the urethra, either during the night or on going to stool. Very frequently there are a number of fine threads in the urine, or the latter may appear generally turbid. Soon other symptoms occur. There is a very frequent desire to pass water, though sometimes very little is passed, there being difficulty and pain towards the end of the act. There may also be pain when at stool, and sensations of weight, fulness, tickling, and

itching in and around the lower bowel. Pain in the back is almost invariably complained of. The temper is usually irritable, sometimes despondent. Nocturnal emissions may be distressingly frequent, and sexual power is occasionally impaired.

The malady, without proper treatment, is generally progressive. Urination becomes more and more frequent, till the sufferer has to rise two or three times every night, and thus gets no satisfactory rest. At the same time sexual desire may be greatly exaggerated, though the actual capacity is diminished. Emissions or discharges of prostatic fluid take place constantly. Appetite may be bad, digestion faulty, and the bowels irregular. The patient loses flesh and grows weak, and the smallest indiscretion in diet, or a short exposure to wet or cold is apt to bring on complete retention of urine.

This phase occurs sooner or later in almost every case. The onset may be sudden, as just described, and the liability of elderly men to such attacks after dining out is notorious. Or retention may come on gradually; the passage of water becoming more and more difficult, till it ceases entirely. In either case the patient cannot pass a drop of water, and endures intense pain. Overflow soon follows, a little urine, often bloody, dribbling away involuntarily from the over-distended bladder. Pain becomes intolerable and, other means of relief failing, recourse is nearly always had to instruments for emptying the bladder. But this is no cure. Retention occurs again and again or persists without intermission, compelling the daily use of instruments.

COMPLICATIONS.—Cystitis (which see) is by far the commonest complication of prostatitis, but the obstruction to the flow of urine may also lead to dilatation of the ureters and kidneys, and finally to almost complete destruction of the latter, and hence to uræmia and death. Other possible complications are bleeding into the bladder, sometimes dangerously profuse, abscess of the prostate, fistula (*i.e.*, a small hole on the skin or within the bowel, through which urine dribbles), inflammation of the testicles, sterility, stone in the bladder or prostate, piles, and cancer.

DANGEROUS TREATMENTS.—Do not rely on *opium* and other *anodynes*. They soon lose effect if the dose is not constantly increased. Refuse *injections*, which are apt to aggravate the damage; and strenuously oppose *cauterisation of the prostate*, a brutal measure extremely likely to lead to stricture. Never consent to the habitual use of *catheters*, *sounds*, or *bougies*. They bruise and tear the urinary

organs. The prevalent practice of teaching the patient to use a catheter himself is simply courting disaster. Reject *massage of the prostate*. This very disgusting manipulation even in skilful hands mostly over-irritates the sensitive gland. Finally do not consent to *operations*. Castration is apt to increase mental depression to the verge of insanity or suicide. Prostatectomy (complete removal of the gland) is the latest fashion. It is a very severe operation, with a high death-rate. Recovery is extremely slow and painful, and distressing symptoms are frequently as pronounced after as before.

SCIENTIFIC DIRECTIONS.—Relieve pain, nocturnal urination, and all distressing symptoms, without employing violent remedies. Discourage alcoholic and sexual indiscretions, exposure, and other injurious influences. Give the following, varying the dilutions and doses to suit the whole group of symptoms, and aiding their action by means of external measures:—*Acon.*, *Ac. fluor.*, *Agar. musc.*, *Arg.*, *Arn.*, *Ars.*, *Bar. carb.*, *Bellad.*, *Calc. carb.*, *Camph.*, *Canth.*, *China*, *Coff.*, *Dulc.*, *Ferr. mur.*, *Gels.*, *Hepar sulph.*, *Hydrast.*, *Iod.*, *Kali bichrom.*, *Kreasot.*, *Lycopod.*, *Nat. mur.*, *Nux vom.*, *Phosph.*, *Phytol.*, *Puls.*, *Silic.*, *Staphis.*, *Spong.*, *Thuja occ.*, or *Verbasc.*

CHRONIC URETHRITIS.

[*Gonorrhœa*, *Gleet*.]

Unless promptly cured, this malady is apt to lead to extremely serious and dangerous consequences, affecting not only the sufferer himself, but also his family.

CAUSATION.—The disease is damage to the mucous membrane of the urethra, due to the invasion of micro-organisms, generally the one known as the gonococcus. The clearer discharge of the later stages, spoken of as gleet, which shows no organisms, is generally prostatitis. Urethritis is a contagious malady, that is to say, infection is derived from someone already afflicted; and it can only enter the system through mucous membranes. Accidental infection, by the use of a contaminated towel for example, is extremely rare.

SYMPTOMS.—Symptoms appear on the fourth, fifth, sixth, or seventh day after infection, very rarely as early as the second or as late as the tenth. The first symptom is itching or irritation at the urinary orifice. A slight discharge is next observed. In a day or two the discharge becomes profuse, continual, white or yellowish, and characteristically thick and creamy-looking. The edges of the urinary aperture are now markedly swollen and red. Urination is at-

tended by intense, scalding pain; erections are frequent, particularly at night, exceedingly painful, and a little blood is sometimes passed. Spasms of pain about the end of the bowel may be almost constant, or follow urination. In from four to six weeks symptoms may diminish in intensity, and the sufferer is now liable to the grave error of thinking himself cured. But this is not so. The slightest indiscretion, such as occasional alcoholic or sexual indulgence, is liable to bring on a relapse, all symptoms becoming again nearly or quite as severe as at the outset; and this stage of so-called chronic urethritis, with or without relapses, may continue indefinitely, with no tendency to spontaneous cure.

COMPLICATIONS.—The complications of urethritis are very numerous and important. In the early stages they include: abscess of the urethra, retention of urine, cystitis, orchitis, and bubo (inflamed glands of the groin). Later may occur gonorrhœal rheumatism or arthritis, marked by painful and swollen joints, sweating, prostration, and even death. Gonorrhœal ophthalmia is common and may lead to total blindness. Gonorrhœal warts sometimes appear on the genital mucous membrane. Heart disease, pleurisy, pneumonia, and neuritis are not unknown. Prostatitis, nocturnal emissions, impotence, and sterility are all frequent results. And stricture of the urethra may also ensue, causing partial or complete retention of urine. In women inflammation may spread to the womb and allied organs and cause incurable sterility. If enceinte, a woman suffering from gonorrhœa may give birth to a blind child.

DANGEROUS TREATMENTS.—Avoid *copaiba*, *cubebs*, and *turpentine*, which, being powerful irritants to the genito-urinary system, are likely to aggravate the mischief. Beware of powerful *injections*, *bougies*, *sounds*, and *catheters*. All add further injury to the damaged tissues, and may spread infection to previously healthy parts. Drastic local treatment of this kind is undoubtedly the most frequent cause of stricture.

SCIENTIFIC DIRECTIONS.—Subdue the pain associated with urination and erections by very gentle means. Exclude indiscretions and excesses, but do not insist on absolute rest, if inconvenient. Order local treatment, if indicated, and give suitable doses of *Acon.*, *Ac. fluor.*, *Ac. phosph.*, *Apis mell.*, *Arg.*, *Bellad.*, *Camph.*, *Canth.*, *Carb. veg.*, *China*, *Coff.*, *Dalc.*, *Ferr. mur.*, *Gels.*, *Hepar sulph.*, *Hydrast.*, *Ign. am.*, *Kreasol.*, *Lupul.*, *Moschus*, *Nux vom.*, *Phytol.*, *Puls.*, *Staphis.*, or *Thuja occ.*

SEMINAL ASTHENIA.

[Spermatorrhœa, Seminal Emissions.]

This fairly common malady causes great suffering of both mind and body.

CAUSATION.—The disease lies probably in the nerve centres or branches controlling the seminal vesicles (situate at the base of the bladder), but microbial infection is a quite possible disease-producing agency. The malady occurs at all ages after puberty (14), but is rare in old age. The malady is common in those addicted to alcoholism, sexual excesses, and secret vicious practices. Occasionally it is met with as a symptom of nervous ailments, such as neurasthenia, epilepsy, and spinal disease; or spermatorrhœa may complicate piles, or maladies of the urine-genital system, such as gonorrhœa, urethritis, prostatitis, cystitis, orchitis, and even Bright's disease.

SYMPTOMS.—The complaint, within limits, may vary greatly in different individuals. Occasional emissions in chaste individuals, occurring, say, once in four to six weeks, need not cause anxiety. It is only when unusually frequent, or when they leave behind headaches or a feeling of great lassitude, that they indicate disease. But involuntary emissions during waking hours are always abnormal and to be regarded with apprehension. Seminal fluid may also come away mixed with the urine, or escape when at stool, as in the case of prostatitis. Headaches are frequent, mainly at the back of the head. There may be backache, numbness, lassitude, drowsiness, irritability, loss of memory, and often marked restlessness and aversion to society. Flatulence, heartburn, eructations, and constipation are frequent, and may lead to wasting; and many sufferers complain of shortness of breath, palpitation, dimness of sight, noises in the ears, or even deafness. Lastly, the organs may become smaller and shrunken.

COMPLICATIONS.—Neurasthenia, melancholia, and other forms of insanity are, perhaps, the commonest complications, and suicidal tendencies are not rare. This trouble is often found in the initial as well as in later stages of spinal disease. Phthisis may occur when there is pronounced emaciation. Lastly, impotence and sterility may supervene.

DANGEROUS TREATMENTS.—Avoid large doses of strychnine, phosphorus, and other tonics; they are far more likely to produce poisonous than curative effects. For the dangers of *sounds, bougies, cauterisation, and massage of the prostate*, see under Prostatitis.

SCIENTIFIC DIRECTIONS.—Alleviate physical and mental

distress, if present, by mild hygienic measures. Pain is very rare. Correct bad habits and faults of living, without uselessly irksome restrictions. Above all, exclude excitement of the affected organs. Give carefully-regulated doses of the following drugs, supplemented if need be by non-medicinal curative procedures:—*Agar. musc.*, *Arg.*, *Bellad.*, *Camph.*, *Canth.*, *China*, *Coff.*, *Dig.*, *Ferr. mur.*, *Gels.*, *Graph.*, *Hepar sulph.*, *Iod.*, *Lupul.*, *Moschus*, *Nat. mur.*, *Phosph.*, *Phytol.*, *Rhus tox.*, *Staphis.*, or *Verbasc.*

LACK OF VIGOUR.

[Impotence, Sterility.]

Under this heading are included two conditions which must be clearly distinguished, viz., impotence and sterility. Impotence denotes inability, in a man, to fulfil the marriage rite; by sterility is meant incapacity to beget offspring. In both cases much unhappiness may result, but from my experience, many sufferers considered beyond help are perfectly curable.

CAUSATION.—Excluding physical defects and deformities, impotence is invariably due to damage of some kind in the brain, spinal cord, or nerve branches. Among the numerous causes most likely to injure the nervous system in this way the following may be named: alcoholic excesses, abuse of tobacco and drugs, sexual intemperance and secret vice, and mental influences, such as long-continued worry and grief, aversion, shyness, and want of confidence. Often impotence is merely a symptom of certain forms of insanity, neurasthenia or other brain maladies, spinal inflammations or degenerations; or it may be a complication of such maladies as diabetes, consumption, cancer, syphilis, gout, Bright's disease, gonorrhœa, prostatitis, cystitis, spermatorrhœa, and other genito-urinary troubles. In true sterility (azoöspemia) the active microscopic cells necessary for procreation are not produced by the body, and this may be due to heredity, to gonorrhœa followed by inflammation of the testicles, to syphilis, etc.

SYMPTOMS.—In addition to the condition indicated by the name, sleeplessness, digestive troubles, wasting, and increasing weakness may be present. Some sufferers have frequent seminal emissions, but these more often precede than follow the malady. Where sterility exists without impotence there are usually no symptoms beyond the absence of children, and the disease can only be detected by microscopic examination.

COMPLICATIONS.—The victims of this malady often give

way to despair and not a few of them commit suicide. Others become insane, melancholia being the commonest type. Paralysis frequently follows impotence, the latter being a symptom of brain or spinal trouble.

DANGEROUS TREATMENTS.—Beware of *quack remedies* and *patent medicines*. They are quite useless, but may be highly injurious. Do not take large doses of *phosphorus*, *strychnine*, *damiana*, or *cantharides*. Such drugs often produce temporary stimulation, but this is followed by reaction and fatigue, and may lead to still more severe maladies. For *sounds*, *cauterisation*, and *electricity* see Prostatitis.

SCIENTIFIC DIRECTIONS.—Moderate mental distress by gentle means, of which skilful psychic suggestion is often the most efficacious. Regulate the patient's personal hygiene, without undue severity, so as to eliminate aggravating factors. Give the following in minute doses:—*Agar. musc.*, *Arg.*, *Bellad.*, *Camph.*, *China*, *Dig.*, *Ferr. mur.*, *Gels.*, *Lupul.*, *Nat. mur.*, *Nux vom.*, *Op.*, *Phosph.*, *Tabac.*, or *Thuja occ.* Also employ suitable outward applications.

CHRONIC METRITIS, VAGINITIS, AND VULVITIS.

[**Inflammations of the Female Reproductive Organs.**]

These maladies are extremely common among women, and cause a vast amount of suffering. Moreover, they may pave the way for cancer in those parts, and other very serious complications.

CAUSATION.—The disease is probably due to the invasion either of the womb itself or some of its subordinate organs by one or several varieties of micro-organisms, which have not yet been definitely identified. Vaginitis and vulvitis may occur at any age, metritis rather more frequently during middle life than in young or old women. These complaints affect all classes, their somewhat greater prevalence among the poor being mainly due to neglect of treatment. Some women seem to have a constitutional tendency to inflammations of these parts, just as many individuals exhibit a peculiar liability to nasal catarrh. Other contributory causes are continued alcoholic indulgence, over-exertion during a monthly period, impure habits, sexual excesses, excessive indoor work, long standing, unsuitable food, debilitating acute illness, such as rheumatism, diphtheria, typhoid fever, measles, and smallpox, the accidents and difficulties connected with child-bearing, and, lastly, tumours and new growths. In children the chief causes are uncleanliness and intestinal worms.

SYMPTOMS.—The first and foremost symptom accompanying the body's struggle against the disease is a discharge. At first it is intermittent, but later becomes almost constant. It is called leucorrhœa or "whites," but it may be yellow, greenish, or even brown in colour. In different cases it varies greatly in thickness, and may be slight or abundant in amount. Rarely it is offensive. The next symptom is pain. Most commonly this occurs at the monthly periods, and it is oftenest located in the back, from the waist downwards, but may extend right round the lower part of the body, or even down the thighs. In character it may be a mere dull aching, or intense burning, throbbing, or stabbing. It begins either with or before the monthly flow, and may last throughout, or only part of the time. Sometimes a membrane (the lining of the uterus) is passed during the period. Usually this happens on the first or second day. In many cases the periods are painful from their first establishment; in some the troubles dates from some later epoch, such as an illness or the birth of a child. Much less often pain is experienced not with but between the periods.

Instances are known of women suffering monthly agony throughout their lives from fifteen to fifty, without other noticeable symptoms. But usually other symptoms appear, such as mental depression, languor, headaches, giddiness, irritability, defective power of concentration, loss of memory, sleeplessness, fainting fits, flatulency, vomiting, and constipation, and occasionally hysterical seizures. A certain number of sufferers are relieved by becoming mothers; in others this only aggravates the trouble. But most often, unless scientific treatment is applied, matters get worse. Pain becomes more severe, discharge more constant and profuse, and associated symptoms more distressing. As time goes on the sufferer may fail to regain strength between her periods and fall an easy prey to some other malady.

COMPLICATIONS.—The irritating character of the discharge may produce itching, smarting, and eezematous eruptions of the parts concerned. The weakened organs are, further, easily infected by the micro-organisms of blood-poisoning, tuberculosis, or other maladies. Cancer, fibroid, and other tumours sometimes develop. An important point is that these troubles often prove an effectual bar to the attainment of motherhood, and occasionally even prevent the consummation of marriage. Cases have been known to end in definite insanity (mania).

DANGEROUS TREATMENTS.—Avoid *patent medicines* and

advertised specifics the composition of which is unknown. Don't fly to *opium*, *morphine*, or other *anodynes*. The relief they give is only momentary, and disastrous drug habits may easily result. Refuse *ergot* and its preparations, which may greatly increase pain. Never take *alcohol* to relieve the pain, because you will require more and more of it. Don't go on indefinitely wearing *instruments* to correct deformities. Serious harm often results, cure never. Don't submit to *operations* for these maladies; they are unjustifiable.

SCIENTIFIC DIRECTIONS.—Relieve pain, irritation, and a very profuse discharge by local applications and similar mild agents. Rectify errors in the patient's life and habits which add to the trouble; and encourage her to persevere. Order non-medicinal and local treatment, if needed, and give, in suitable homœopathic doses, such remedies as: *Acon.*, *Agar. musc.*, *Apis mell.*, *Bellad.*, *Borax*, *Canth.*, *Carb. veg.*, *Cham.*, *China*, *Cimic.*, *Cocc. ind.*, *Coff.*, *Cupr.*, *Dulc.*, *Ferr. mur.*, *Gels.*, *Glon.*, *Hepar sulph.*, *Hydrast.*, *Ign. am.*, *Phosph.*, *Phytol.*, *Plat.*, *Puls.*, *Sepia*, *Thuja occ.*, *Valer.*, or *Veratr. vir.*

TYPICAL CASES FROM MY PRACTICE.

In the following pages you will find some cases that have occurred in my large practice. They illustrate the results that I can achieve with my treatment. Whenever possible I have given them in the patient's own words. I have omitted details of what was ordered, as of no practical value to you, for even if your symptoms correspond with those of one of the patients, your age and constitution probably do not.

You will note that the time required for a cure was often remarkably short. In very light cases a few weeks usually sufficed; and even in more severe maladies two or three months generally produced striking improvements. And remember, I never tried to make the sufferer merely "feel better" for a time by drugging him drastically. I invariably worked towards a complete and permanent removal of the disease itself, and I am never satisfied with anything less, even though treatment may thereby be somewhat prolonged.

Many sufferers, you will see, were treated by correspondence only, where distance or other circumstances prevented a personal interview. Fortunately I have elaborated a system which enables me to arrive almost automatically at a complete diagnosis of any chronic trouble if I am supplied with the necessary particulars in writing; and I can claim to have thus restored thousands of chronic sufferers in foreign countries and distant colonies whom I have never seen. But for my treatment they would probably have perished.

Indeed, I do not hesitate to say that for many patients I prefer treatment by letter. For in most chronic maladies the accurate history of the case reveals more than a pedantic physical examination, and there are few sufferers who cannot set out the history of their complaint more clearly in writing than verbally. Not being hurried, those who give their story on paper never omit any of their symptoms, while in the embarrassment of an interview they are extremely likely to forget some. And in *chronic* maladies completeness of information is indispensable, if the seat of the disease is to be determined.

Case No. 9099:—Apprehension, Nervousness, Great Weakness, Very Rapid Pulse, and Palpitation.

“Dear Sir,—I recently purchased a copy of your book, and should like to have your opinion of my own case. I am a young man of 19. Eight years ago I had acute rheumatism and heart trouble. I was an in-patient in a hospital for seven weeks and an out-patient for a similar period. Previously I had been laid up for about two months. I then enjoyed very good health until last January when, after several nasty colds, I got into a general run-down condition. In February I had rheumatism in the right knee. This rapidly spread all over the body. After a week I had terrible pain in the cardiac region, and was removed to the infirmary, where the trouble was diagnosed as pericarditis. I was kept in bed for 12 weeks and finally discharged. My present symptoms are: rapid pulse: on exertion it frequently reaches 120, and sometimes over. I am very nervous, and have the feeling that my heart might fail any moment. On walking any distance I feel faint and weak.—Yours faithfully, P.K.”

An interview was arranged, and it was elicited that the patient had attacks of palpitation. Usually the heart-beat was feeble. His hands and feet were always cold. He suffered from indigestion, and complained of occasional pain in the lumbar region. Examination confirmed the opinion already formed that his heart was the main seat of disease, and the treatment (on the lines given at p. 42) was arranged accordingly.

At the end of a fortnight he was able to report as follows:—“I am feeling much stronger and better. The heart seems much stronger, and I am losing the feeling of apprehension. The pulse seems steadier and stronger and not so rapid.” And 10 weeks after beginning treatment he wrote:—“My general health still continues very satisfactory. Except for one or two occasional slight twinges I have not had any further rheumatism. My heart seems to be greatly improved.”

Case No. 9188:—Constant Aching of Legs, Difficulty in Walking, Headache, Depression, Irritability, Frequent Pains in Back, and Failing Strength.

“Dear Sir,—I happened to pick up your recent publication last week. I have been suffering some time from what I have been told is a nervous trouble, and, although I have consulted four different allopathic doctors during the past four or five years, I am still suffering and should like to have

an opportunity of consulting you. The symptoms are: (1) dull, aching pains down both legs, being the more severe in the left, particularly troublesome on waking in the morning. The pains are aggravated by walking, golfing, etc., and when bad I find it difficult to walk more than a mile without feeling done up. The trouble is also accentuated by severe mental effort and anxieties. I may add that this symptom is *constant* and of about five years' standing. I also experience slight pains down the left arm. (2) Sharp gnawing pain at the bottom of my spine. When bad it causes a feeling of nausea and much personal irritability. This trouble is intermittent. It is brought on by any form of excess, such as lifting, walking, and physical effort. It is also bad after mental strain and sexual indulgence. I get irritable and depressed, and my powers of concentration are suffering accordingly. I have suffered from this trouble for several years, and attribute it to bad habits during young manhood. (3) Age 39, married, chartered accountant. I am 9st. 2lbs. in weight, active, careful in all my habits, a man of many responsibilities. . . . The diagnoses of my four allopathic friends are as under: (1) Nothing the matter with me; largely imagination. (2) That unless I am very careful I shall have a serious breakdown. (3) Neuritis—intractable. (4) That I have never had neuritis, and that all I need is rest. I am satisfied they are all wrong, and that if I were intelligently and scientifically treated I should get well. I shall be in London on Tuesday next, and if you think a consultation desirable I could call upon you. If you need any further information in the meantime, please write me.—Yours faithfully, C. P."

An interview was arranged, and further particulars were gathered as follows:—The patient was pale and had dark rings round his eyes. His memory was not so good as formerly, his sleep was broken, and he had headaches at the back of his head. Also he had varicose veins in his legs, a small varicocele, and occasional attacks of piles.

Clearly, then, the patient's blood-vessels were rather extensively diseased. In addition, his brain was affected. He was, in fact, afflicted with what is called cerebral neurasthenia, and there was danger of this condition, unless promptly dealt with, leading to mental incapacity, if not to insanity. Treatment (described on pp. 26, 45) was conducted subsequently by correspondence. Improvement was remarkably rapid, for after only a fortnight's treatment Mr. P. could announce diminution in the severity of nearly all his symptoms. At the end of a month he wrote: "The pain in

my spine has practically disappeared. The pain at the back of my head was very troublesome until about a week ago, since when it has disappeared. The pains in my legs are much better. I feel little of them except in the early part of the day. On the whole I am greatly improved. I can now endure considerable mental effort without fatigue."

Case No. 10199:—Rheumatism, Disturbed Sleep, Palpitation, Cold Hands and Feet, Indigestion, Nocturnal Emissions, and Urinary Obstruction.

"Dear Sir,—I have read your book with deep interest and learned from it how greatly I have injured myself; but, relying on your great practice and experience, I feel that there is still hope for me. I am a teacher, 30 years old, and unmarried. As a boy I did many foolish things, and from what I recall, must on one occasion have had some acute bladder trouble. About the same time, too, I had typhoid fever, from which I recovered fairly quickly. Two years later I had articular rheumatism, which kept me in bed for several weeks. I took a great deal of *salicylates*, but since then I have been afflicted with valvular disease, and my rheumatism returns every year. In addition, I contracted urethral infection, which was treated in the usual way by means of injections and bougies, with the result that I have now a slight stricture. I often suffer from heartburn after food; and I am very liable to catch cold. Please let me know your fee.—Yours, etc."

In response to questions the patient reported further symptoms. His heart palpitated most violently at times. His hands and feet were cold. Sleep was unrefreshing and disturbed by bad dreams. He had pains in the loins, and an irritation in the back passage. Nocturnal emissions occurred frequently, and left him languid and depressed.

There were thus abundant indications of extensive damage to the heart, nervous system, kidneys, and genital organs, and his condition required prompt treatment (of the kind indicated at pp. 26, 42, 64, 71). This had to be conducted entirely by correspondence. How rapidly the patient progressed may be gathered from the following report, written only six weeks later:—"I am feeling considerably better. My sleep is very much more refreshing. In the morning I do not feel tired, as I used to. There were no unpleasant after-effects whatever after the only emission I have had; and the indigestion is almost entirely gone." His further progress continued satisfactory, and he was soon fully restored.

**Case No. 8734:—Intense Gouty Pains in the Joints,
Marked Depression and Irritability, Broken Sleep,
Frequent Urination, Fainting Fits, and Extreme
Debility in a Man of 73 (Death Impending).**

Mr. ———, 73, a widower and retired bank manager, came to me "doubled up with pain," due to what his former medical advisers had termed "chronic rheumatoid and gouty arthritis." His trouble was of considerable standing, and he could now only walk by a great effort, every step being accompanied by excruciating pain, situated for the most part in his knees. The latter, indeed, were so stiff that he could hardly bend them at all. In addition, he slept very badly, was obliged frequently to rise at night to pass water, and though by nature of a cheerful disposition, had lately become very morose and irritable. His face showed an ominous bluish tinge, his eyes were dull and puffy, and he had recently experienced several fainting attacks. His pulse was 100 per minute and very feeble, and the specific gravity of his water was 1020.

The patient's family history was very bad. Both his father and grandfather had been gouty, the former having died from some form of the malady.

There could be very little doubt that disease had affected the sufferer's heart, blood-vessels, and kidneys, and that, in consequence, his blood had become loaded with poisonous waste-products. Moreover, his condition was not of yesterday; and though his local doctor, after the usual fashion of pooh-poohing all anxiety, had tried to reassure him by declaring that he was "quite a healthy man for his age," there could be no doubt that his life was really in most imminent danger.

Scientific treatment (outlines of which are given on pp. 42, 45, 50, 64) was begun immediately, and though progress was slow and halting at first, as was inevitable in so serious a case (the patient being at times seemingly as bad as ever), improvement after the first four weeks became rapid. In a little over two months Mr. ——— could walk (in his own words) "admirably" and was free from pain. He could, in fact, go three or four miles at a time without fatigue. He now slept well and was no longer irritable and depressed; while his improved appearance made astonished friends remark that "he looked quite a different man." In short, he now has every prospect of a long life.

Case No. 9226:—Bad Circulation, Piles, Sleeplessness, and Palpitation.

Mrs. ———, aged 30, was brought to me by her husband, another patient of mine. She appeared healthy, having a fresh complexion, but, in reality, was far from well. Her chief complaint was extreme difficulty in getting to sleep: she often lay for hours before doing so. She was subject to palpitation of the heart on the least excitement, and suffered from piles.

I diagnosed trouble in the heart and blood-vessels. She was a very obedient patient and, consequently, recovery was remarkably rapid. Her pulse-rate, which had at first been 120, fell, week by week, to 112, 104, 96, 88, and finally to 80, which is the normal, healthy rate for her age. Within three weeks after beginning the treatment (which was on the lines suggested at pp. 42, 45, 48), she could fall asleep almost immediately she was in bed, and this continued so. And since my treatment she has never had another attack of piles.

Case No. 10048:—Loss of Flesh, Susceptibility to Colds, Splitting Headaches, Pains in Stomach and Back, and Irregular Action of the Bowels.

"Dear Sir,—I am in the police service, 33 years old, and married. I frankly confess that from the age of 12 I was given to vicious habits for five years, and to this I attribute the serious weakening of my constitution. My chief trouble now is indigestion, and during the last 12 months I have been losing flesh considerably. I frequently suffer severe pain in the stomach, and am troubled with constipation and diarrhoea alternately. My walk has lost its elasticity, I often have pains in my back, on both sides of the spine, and I stoop a little. I have specks before the eyes. I am so miserable that, though my salary is small, I will gladly make any sacrifice to get well again. I enclose on account, and once more beg you to use your best endeavours to restore me.—Yours, etc."

In a subsequent letter the patient gave a few additional details. His eyes were sunken, he suffered from splitting headaches, and from shortness of breath, and he was always catching colds.

The stomach and bowels were seriously affected, but appeared quite curable at this stage. Were scientific treatment (as on pp. 37, 38) always applied early, many cases of permanently dilated or chronically ulcerated stomach, and probably even of cancer in the digestive canal, would never occur. The patient rapidly improved. He soon lost the

pains. He gained flesh and strength, and the bowels became regular. After only seven weeks' treatment he was able to write: "I now find nothing at all to complain of. My appetite is good, indigestion has entirely disappeared, and I feel extremely well." I never saw this patient, and treatment was carried through entirely by post.

Case No. 9022:—Severe Thirst, Rapid Wasting, Great Debility and Palpitation, the Sufferer passing Large Quantities of Water containing Sugar. (Diabetes Mellitus.)

Mr. ———, who was 39 years old, sought my advice for diabetes. He had been ill 15 months, all the time getting steadily worse, in spite of medical treatment from routine practitioners. Though limited to a rigid diabetic diet, he was now passing a daily average of 84 ounces of urine, which contained $5\frac{1}{2}$ per cent. of sugar. He had to rise to pass water several times every night. He also complained of great thirst and frequent palpitations, had lost weight rapidly, and was so weak that he could hardly drag himself to business and returned home in the evening utterly exhausted.

This patient was clearly very seriously ill with diabetes. Under my treatment (for which see pp. 35, 36), commenced immediately, his daily quantity of urine quickly fell to nearly normal (about 50 ounces), and in 10 or 11 weeks he felt "quite himself." He looked fit and strong, could eat any kind of food, including sugar and starchy food in moderation, could go five or six hours without drinking, and was not disturbed at night. He was gaining weight at the rate of as much as $1\frac{1}{2}$ lb. in one week, and friends as well as his former doctor could not forbear remarking on his vastly improved appearance. About $3\frac{1}{2}$ months after coming under my treatment he left me cured, and has remained well since.

Case No. 9106:—Diabetes with Weak Heart, Nervousness, Pallor, and Other Symptoms.

"Dear Sir,—Having read one of your books carefully, I should like to have your advice. I am 36 years old, single, have lived a pure life, and am in the teaching profession. I have been under treatment for diabetes, and though better, since my diet has been restricted, am not cured. I cannot have a personal interview with you, but would like to know what treatment you could give me, as I see from your book that diabetic patients have improved.—Yours faithfully, A. K."

The following further particulars were supplied by the patient:—He was of medium height, had become very emaciated, and was pale, nervous, and easily fatigued. His heart's action was feeble, his lips dry, his tongue cracked, and he was subject to attacks of acute tonsillitis and severe diarrhoea. He also, at times, had pains in the kidney region, and also swollen eyes.

All the symptoms pointed to the malady known as diabetes mellitus, the actual disease, in this case as in most others, being situated in the brain. By abstaining from sugar and starchy foods the patient had no doubt succeeded in reducing the amount of sugar passed, but this reduction was no cure. It were as reasonable to assume that a spell of dry weather has repaired the hole in your roof, because the rain ceases to come through. The persistence of other symptoms associated with diabetes proved that the disease was still present. Under systematic treatment (as outlined on pp. 35, 36), though there were practically no restrictions of diet, the characteristic symptoms of the malady, one after another, disappeared within a comparatively short period. He gained appreciably in weight, which is the true criterion of recovery, and all "his friends noticed that he looked much better."

Case No. 8939:—Lassitude and Debility, Headaches, Indigestion, Pains in the Back, and Frequent Emissions.

"Dear Sir,—A friend of mine gave me your book, and I am greatly afraid that I, like others, have sinned against Nature. I am 20 years old and a linotyper in a printing office. When 14 I came under the ban of a certain secret habit, but am glad to say I succeeded, 18 months ago, in breaking myself of it. However, I still suffer from the consequences of my folly: my symptoms being pains in the back, headaches, profuse perspiration even after slight efforts, and frequent emissions. My face and back show nasty pimples.—Yours, etc., . . ."

This patient could not come to me, and additional particulars were obtained by letter. He stated that he was an abstainer and smoked moderately. His headaches were mainly at the back of the head. His digestion was bad, he was rather constipated and complained of flatulence. Nocturnal emissions left the sufferer weak, languid, and depressed on the ensuing day.

Here was a typical example of early disease of the brain and spinal cord. The patient was advised to take a two-

months' course of the treatment outlined on pp. 26 and 29. Progress was steady, and in less than six weeks he could announce himself practically cured. To quote his own words: "My condition has enormously improved and I am altogether a different person. Headaches are now extremely rare, occurring only if the day's work has been extra heavy. Emissions now take place only at long intervals, and the following morning there are neither headaches nor other ill effects."

Case No. 7940:—Great Depression, Sleeplessness, Lassitude, Severe Headaches, Frequent Emissions, Pains in Lower Bowel, Breathlessness, and Susceptibility to Colds.

"Dear Sir,—Some time ago your book came into my hands and I read it with great interest as, I regret to say, I am myself a sufferer. I am now 20 years of age and, when 11, was taught vicious habits by a schoolfellow. I was ignorant of their terrible consequences, and my health soon suffered. Digestive troubles resulted, and my physical development was hindered. At the present time I am always frightfully depressed and melancholy, and have lost all enjoyment of life. I suffer from frequent severe headaches, chiefly frontal, and my whole body seems in a state of chaos. I am often sleepless, and nearly every week am troubled with emissions, followed by great weakness and general lassitude. Naturally I am always disinclined for work, and I take colds very easily.

I shall be greatly obliged if you will give me some advice as to what I am to do.—Yours faithfully, A. R."

In reply to questions addressed to him the sufferer supplemented his story with additional details, from which I learned that his complexion was of an earthy tint, his appetite was capricious and he was constipated. He had pains in the back and in the lower bowel. His sleep was much disturbed by dreams. He further complained of shortness of breath, palpitations, and noises in the ears.

The brain and spinal cord were the seats of disease, but there was also evidence that the heart and the genital organs were affected. A three-months' course of treatment (see pp. 26, 29, 42, 73) was recommended, and in less than 10 weeks the patient was so much better that he wrote: "I can report that my health has again greatly improved. My general condition is now quite good. My complexion has become ruddy and healthy. I only experience palpitation after violent exertions. An emission occurred after a long

interval, but next morning I observed none whatever of the ill-effects to which I was formerly subject."

*. * A doctor or chemist would, in all probability, have given these patients (cases 8939 and 7940) tonics, which might have made them "feel better" for a time. Poisonous tonics would certainly not have cured them, but rather have aggravated the disease itself in the brain and spinal cord; and sooner or later they would most likely have developed brain and spinal maladies in their most distressing form. By my gentle method of treatment, directed towards rejuvenation of the brain and spinal tissues, they will be spared that horrible future.

Case No. 9013:—Unhealthy Appearance, Frequent Headaches, Shortness of Breath, Extreme Nervousness, Shyness, Timidity and Aversion to Company, in a Child.

G. H., a boy aged 9, was brought to me by his father, who had, at one time, been under my care. The boy, in appearance, was unhealthy, with dark rings round his eyes and without the fresh complexion natural to his age. He seemed incapable of looking one straight in the face, and showed nervous habits, such as continually holding his fingers to his mouth, as if biting his nails. In addition, the father reported that he was very nervous and timid, shunned company, did not like to mix with other boys at play, and was dull in school. He used to get out of breath easily, and frequently complained of headaches.

The patient's whole appearance and manner strongly suggested secret vice, which had affected the child's nervous system so profoundly that he was well on the way to imbecility. The father, at first incredulous, questioned the boy, who admitted the habit.

Treatment (as indicated at p. 26) was instituted without delay, and recovery was remarkably rapid. In less than 10 weeks the little patient had changed entirely. He slept well, was free from headaches, and no longer breathless. The change in his appearance and disposition was noted at school by his teachers, who were equally astonished at his mental improvement. Nervousness left him, his courage awoke, and the boy who had formerly almost feared his own shadow, now, to the utter surprise of his parents, clamoured to be allowed to join the Boy Scouts.

Case No. 9027:—Enlarged Glands in the Neck, Pallor and Wasting, in a Child with a Family History of Tuberculosis.

A little girl of 12 was brought to me suffering from a lump in the right side of her neck. The patient was very tall for her age and excessively thin, and her face was extremely pale and drawn. Tuberculous maladies had been rife in her family, her grandfather and aunt, both on the father's side, having died from complaints of that nature. Some time earlier an enlarged gland had been removed from the left side of the child's neck, and the operation had necessarily left a scar. The parents had been assured that an operation was the only possible treatment, and that there would never be any further trouble. But recently a swelling had made its appearance on the right side and steadily increased.

Everything, therefore, pointed to tuberculosis of the glands. Appropriate treatment (outlined at p. 61) was begun without delay, and in six weeks not a trace of the swollen gland remained. The little patient was kept under observation for several months, during which time she became plump and rosy, and never had the slightest return of her trouble. Ultimately her father wrote:—"I am very grateful at my daughter's great improvement, and shall always regret she did not see you long ago, before her operation."

Case No. 9048:—Sick Headaches, Constipation, Tendency to Colds, Red Deposit in Urine, and Nocturnal Emissions.

"Dear Sir,—Having read your book I feel prompted to write and explain my case. I am a farmer, 42 years of age, single, and my complaint is biliousness and sick headaches, from which I have suffered since I was quite a child. For 20 years or more I have had to resort to liver pills once or twice a week to prevent the recurrence of sickness and headaches, the bowels being inclined to be constipated. The headaches are frontal and chiefly over the left eye, and are now of almost daily occurrence. My urine contains, and has done, also since I was a child, a red deposit. Further, I now have nocturnal emissions on the average once a week. In my younger days I was very subject to colds in the head, my father having been a very delicate man who died of consumption. If you feel you can treat me, I shall be pleased to furnish answers to any further questions.—Yours faithfully, B. F. F."

A personal consultation was arranged. At this the patient, a thin, sallow man with dark patches under his eyes, complained further of mental depression, treacherous memory, great lassitude, and severe pains in the back; and a survey of all the symptoms showed that disease had attacked not only the brain and digestive organs, but also the spinal cord, kidneys, and prostate gland.

Treatment (on the lines shown on pp. 26, 29, 37, 66, 70) was thenceforth conducted by letter, no further interview taking place. Progress at first was by no means uninterrupted, and the patient exhibited considerable and unreasonable impatience and despondency. Indeed, in one letter he wrote:—"It certainly does tend to shake one's confidence in the efficacy of a treatment when, after a month's course, one is practically as bad as when one began." But he was systematically encouraged to persevere, until at length improvement set in and thereafter continued steadily. Headaches grew less and less frequent, and finally ceased. The bowel troubles gradually disappeared. Sleep was good, rising at night becoming an event of great rarity. The patient gained strength and lost his nervousness and depression. In short, all his symptoms vanished by degrees, and $3\frac{1}{2}$ months after beginning treatment he was able to write as follows:—"I have been trying the effect of doing without medicine for a few weeks, to see if the improvement I had previously reported would be maintained, and I am pleased to say it has. . . . I thank you for the consideration you are giving my case, and must congratulate you on the marked improvement."

* * This is one of my numerous cases showing how sufferers underrate, or altogether fail to appreciate, the disorder into which the complicated machinery of their bodies has been thrown, and how they foolishly think any trouble capable of being put right at the shortest notice by a little medicine. Medicines no doubt exist by which this and that symptom may be violently suppressed. But the physician who panders to the demand for an immediate semblance of benefit is doing a wrong and, indeed, criminal thing. For such "lightning cures" are always dearly purchased at the cost of years of misery. A cure, if real and permanent, cannot possibly be instantaneous, since it must involve the repair of all the injuries which disease has inflicted on the body and the gradual restoration of their proper functions to all its organs. Fortunately this patient, in spite of signs of impatience, persevered with my systematic treatment and was duly rewarded.

Case No. 6965:—Distressing Giddiness, Failing Memory, Headaches, Loss of Strength, Indigestion, Obstinate Constipation, and Urino-Genital Troubles.

“Dear Sir,—I came by chance into possession of your book, and was much struck by the closeness with which some of the descriptions therein correspond with my own physical condition. I am 40 and employed in a bank. I have been married 18 years; no children. I am pale, and my eyes are rather dull. Other symptoms are: failure of memory, frequent headaches, an occasional sense of weight in the stomach, and recently marked vertigo on walking; also when washing myself in the morning. My bowels act very irregularly and the motions are generally very hard. On the other hand, I cannot complain of my appetite. To give my history, I must regretfully admit that I was addicted to a certain habit from 14 to 22. I must also have done myself great harm in my earlier years by habitually disregarding the calls of Nature. Once, when a young man, I had a discharge, followed by a very painful inflammation of the testicles. I did not seek medical advice as I should have, and, in the end, both discharge and inflammation subsided. But about three years ago I had so much difficulty in passing water that I at length went to a surgeon, who diagnosed a stricture. He passed bougies, with the result that I was frequently bleeding. Ultimately I saw another medical man, who also found varicocele and an enlarged prostate. I believe I have now given you sufficient details, and shall be very grateful for your advice. In the meantime I beg to enclose a cheque on account, and trust that in fixing your further charges you will consider the fact that I am only a man of moderate means.—Yours truly, . . .”

Later the patient furnished the following additional details:—He owned to great irritability. His eyes were sunken, and he noticed brown spots on his skin. He had difficulty in falling asleep and often woke in the night. Headaches were usually located in the back of the head, or in the temples, and he often had noises in his ears. He complained of great weakness and of being fatigued by slight exertion, and he caught cold very readily. He was troubled with heartburn, flatulence and eructations, suffered from irritation in the lower bowel, and at times from piles. Urination was abnormally frequent, there was often a sticky discharge, and sexual desire was markedly deficient.

Though there was evidently local damage to the genito-urinary organs, the whole group of symptoms pointed unmistakably to the spinal cord as the most important seat of

disease. Under treatment (as set forth on pp. 29, 70, 71) progress was necessarily slow at the outset. However, at the end of about three months he wrote as follows:—"I now feel almost completely restored. I have not noticed any giddiness for the last two months. The skin blemishes have entirely disappeared, with the exception of a few spots on the right shoulder. In addition, I am happy to say that for a long time I have had no indigestion, and urination is also far more satisfactory. My bowels, however, will not act without an euema, and the motious are still very hard."

Though most of the symptoms had gone, the persistence of constipation showed that recovery was still incomplete, and, having regard to the severity and long duration of his malady, I advised the patient to continue the treatment for a further three months. This was entirely successful for, at the end of that time, he was able to report that for nearly two months he had had a regular daily motion without the use of any purgative or enema, a state of affairs "never known before in his life."

Case No. 5834:—Loss of Hair, Bad Headaches, Disfiguring Spots, Pains between the Shoulders, Indigestion, and Palpitation.

"Dear Sir,—I am writiug you this letter in the hope that you can cure me. I saw your book a few days ago, and learned from it, for the first time, the seriousness of my symptoms. I am 22, by occupation a farmer, and must plead guilty to indiscretion in boyhood. I suffer constantly from indigestion, am extremely depressed, and for the last six mouths my hair has been coming out rapidly.—Yours, etc."

It appeared further that the patient had acute tonsillitis. He was also afflicted with a slight varicocele. Headaches were frequent, mainly in the temples. Other symptoms were: palpitation, pain between the shoulder-blades, difficulty in passing water, particularly at the end of the act, a slight discharge on straining, and lastly, disfiguring spots on his face and neck.

I diagnosed disease in the prestate gland, the brain, and tho spiuial cord. The trouble was not yet far advanced, but his condition, if neglected, was liable to end eventually in the wreck of his constitution. The course of treatment prescribed (particulars are given on pp. 26, 29, 55, 70) effected regular and steady improvement from the first, and 12 weeks afterwards he wrote: "I am exceedingly gratified at the result of the treatment, and feel very well indeed. My hair

is now quite thick again. There now remains scarcely a trace of all my symptoms. My skin is almost clear. Urination is normal, and the discharge gone."

Case No. 8175:—Nervous Depression, Insomnia, Pain in the Back, Palpitation, Shortness of Breath, Trembling, Apprehension, Loss of Memory, and Cold Hands and Feet.

"Dear Sir,—A little while ago your book came into my possession, and it opened my eyes, so that I saw with horror the abyss into which I was falling through my own folly. My only wish now is to do everything possible to repair the harm. I am a teacher, 23 years of age, and was corrupted by evil influences in youth. Till now I had no idea that this could have such terrible consequences. I now look years older than my real age. My nerves are very weak, I constantly tremble and feel apprehensive. I am troubled by emissions, and am quite broken down afterwards. Can you help me?—Yours, etc."

Questions were put to the patient, which produced further information:—He was always very depressed and melancholy, and his memory was faulty. He had pains between the shoulder-blades, and about the loins. He was constipated, and had severe palpitations; his breath was short, sleep was broken and hard to obtain, and his hands and feet were usually very cold.

All this indicated that disease was established in a number of important organs, including the brain, spinal cord, and heart. A routine practitioner would probably have belittled the trouble at that time, and waited until more serious symptoms had set in, when he would have declared the sufferer incurable. In this way many valuable lives are wrecked for want of a little foresight. The early stages of the course of treatment prescribed (which is indicated on pp. 26, 29, 42) were marked by frequent ups and downs, as was to be expected. But relapses ceased after a short time, and improvement now became steadily progressive. Finally, at the end of 16 weeks, the patient was able to report entire recovery, and to state that he now felt "as cheerful and energetic as he had felt when a boy."

Case No. 8440:—Inclination to Suicide, owing to Indigestion, Pain in the Back, Very Frequent Emissions, Headache, Noises in the Ears, Disturbed Sleep, and Troublesome Dreams.

"Dear Sir,—I am writing to ask whether I could be cured by your methods of treatment. I am 24, a decorator,

and work 10 hours a day. Five years ago I developed a malady which I believe to be spinal disease. Quite suddenly, without any apparent cause, a nocturnal emission occurred, followed by others at about weekly intervals, which enfeebled me more and more. I began trying to cure myself, but no good resulted, and I then consulted one doctor after another." (The patient then gave a comprehensive account of the various treatments ordered.) "But nothing they advised produced any lasting benefit, and I began to despair. Indeed, I have only restrained myself from committing suicide by remembering that I am still young, and the natural instinct of self-preservation thus prevails. I now have no less than, on an average, three emissions a week.—Yours, etc."

In reply to further questions the patient reported that he also suffered from pains between the shoulders, in the loins, and in the lower bowel, indigestion with violent eructations, headache, and noises in the ears. He had great difficulty in getting to sleep, and the emissions were preceded by annoying dreams.

These symptoms indicated disease of the brain and spinal cord, and there existed a possibility that, without proper treatment, the sufferer would ultimately become a maniac and, perhaps, completely paralysed, if he succeeded in resisting his fatal impulse to suicide. Treatment (set forth at pp. 26, 29) by correspondence was begun at once, and in about 13 weeks the patient wrote, full of gratitude, that he now felt strong again, that he dreamt only very rarely, and that emissions, if they occurred at all, left no after effects whatever.

Case No. 8936:—Loss of Memory, Nervousness, Dislike of Exertion, with Indigestion, Palpitation, and Insomnia, Pains in Various Regions, and Rashes on the Skin.

"Dear Sir,—A few days ago I chanced to read your excellent book, and, as I am ill, I beg your assistance. I am 32 and unmarried, and ever since boyhood have been given to injurious habits. I am now very much troubled by loss of memory, am a bad sleeper, and shrink from every kind of exertion, whether bodily or mental. I am always very nervous and tired, and suffer from palpitation, pains in the back and knees, and also in the parts. Rashes continually appear on my neck, and my stomach has been out of order for years.—Yours, etc."

The disease in this instance was located in the brain, digestive organs, heart, and blood, and the patient was certainly well on the way to an irreparable mental and physical breakdown. When he wrote there was, however, still hope for him. His occupation, tailoring, being extremely monotonous, this was rather unfavourable to treatment; but the patient could not afford to give up his work even temporarily, and accordingly the cure, which proved quite successful, had to contend with this difficulty (the measures employed may be gathered from pp. 26, 37, 42, 55). He improved slowly, and there were frequent relapses at first, but at the end of two months he sent this excellent report:—"My memory has returned, and the headache and rashes have disappeared. I now sleep well, and have regained my enjoyment of life. I have no more pains in the parts, and but for a very slight discomfort between the shoulder-blades, I now feel a healthy man once more."

Case No. 8812:—Languid Feeling on waking in the morning, Rheumatic Pains about the Waist and in the Knees, Palpitation, Shortness of Breath, Indigestion, and Rashes on the Skin.

"Dear Sir,—I am 33 years of age, and expect to marry in eight weeks' time, but am afraid to take that serious step in my present condition. When 15 I was led into evil ways, and I have not felt well for some time now. My principal symptoms are loss of memory, pains in the back, and a dragging feeling about the testicles. I am also troubled with rheumatic pains about the waist and in the knees, and, on the average, twice a week with emissions, after which I feel very much broken up. Will you let me know whether you think me curable, and also what fee you wish me to remit?—Yours, etc."

Other symptoms, described in a second letter, included an unrefreshed feeling on waking in the morning, shortness of breath, palpitations, and an eruption on the back. There was also a tendency to piles.

In this instance the symptoms showed that disease had affected the patient's brain, spinal cord, and blood-vessels. Obviously he was in no fit state to undertake the responsibilities of matrimony, but a course of systematic treatment (described on pp. 26, 29, 45) soon changed all this. Less than two months later he reported: "My condition has improved enormously. I can now work all day with no sensation of weariness. Sleep, appetite, and bowels leave nothing

whatever to be desired. I have felt no more pain in the genital region, and hardly any in the back. The spots on the back have gone, and so has the pain at the waist. Altogether I feel more spring in me than I have for many years past, and the few emissions I have had lately not only did not weaken me as before, but, on the contrary, left a sense of increased well-being. As I am to be married in three days, I should be glad of instructions for my guidance under the new conditions."

Case No. 8464:—Feeble Heart's Action, Extreme Lassitude, Constant Pressure in the Head, and Urinary Troubles.

"Dear Sir,—After reading your book I am writing to say that I have been a sufferer for many years, and should be glad to know if you can undertake my treatment. The following are the particulars:—I am a man of 55 and unmarried. I always have a dull pressure at the top of my head. I have lately lost flesh considerably. I have difficulty in micturition, have to press forcibly, and the stream is not normal, but very feeble. Altogether all these organs are much weakened, owing to indiscretions in youth. Will you kindly let me know if I may hope for a cure, and also your terms?—Yours truly, E. H."

The patient, a manufacturer, of quiet habits, was asked for further details, and in his reply described the following additional symptoms: mental depression, rapid fatigue on exertion, occasional noises in the ears, very feeble heart-beat, and varicocele.

Reviewing all the above, I came to the conclusion that though the patient's urinary organs were undoubtedly affected, the seats of disease were principally the brain, spinal cord, and heart. As usual in cases of this kind, the first few weeks of treatment (the guiding principles of which will be found at pp. 26, 29, 42, 70) brought no appreciable change for the better. But at the end of about 10 weeks he wrote:—"My medicine will be finished in a few days. As far as my condition is concerned, I can report most satisfactorily. My mental state has distinctly improved. The tiredness in the legs has ceased, and I also feel much stronger in the back. In spite of heavy work I am no longer exhausted in the evening. Will you please let me have further directions?"

Two or three weeks later Mr. H.'s recovery was practically complete. He could announce that he had gained

nearly 7 lbs. in weight since coming under treatment, and that the improvement in his appearance was so striking as to draw congratulatory remarks from his acquaintances.

Case No. 9096:—Uncontrollable Diarrhœa, accompanied by Blood and Mucus, General Debility, Great Thirst, Excessive Appetite, and Loss of Weight.

"Dear Sir,—I obtained one of your books, and see you have cured a case of colitis. I have suffered from that complaint for 14 months, and it has resisted medical treatment up to now. I have been under several doctors, including 10 weeks in hospital. They failed to do me any good, and advised operation if it did not stop, but after reading your book I think operation unnecessary. I am 27 years of age, and follow the occupation of chauffeur, when employed, but have not been able to work for about 9 months, owing to constant diarrhœa and weakness. Last summer I was at the worst, my bowels being moved from 12 to 15 times in the 24 hours, all motions liquid, with clotted and liquid blood and mucus. I practically lost control over my bowels and fell 2 stones in weight. At present I am a little better, and have regained a stone, but diarrhœa still continues, 7 to 12 times daily, with blood and mucus.—Yours truly, A. M."

In reply to questions, the patient further reported extreme depression, cold hands and feet, excessive thirst, ravenous appetite, and an unpleasant taste, accompanied by heartburn and flatulence. He often noticed a sediment in his urine, caught colds very easily, and had occasional neuralgic pain between the shoulders. He had been laid up with pneumonia a few years previously.

Clearly disease had affected the patient's mucous membranes, the malady settling mainly in the bowels and kidneys. Under gentle scientific treatment (described on p. 38), though there were inevitable relapses in the early stages, he, nevertheless, improved so rapidly that within a month he was able to resume his employment as a chauffeur, which included long journeys incidental to touring. Thereafter, in spite of autumnal weather conditions, he continued to send good reports: diarrhœa gradually lessened, blood and mucus practically ceased to appear, he lost his depression, and at the end of 3 months he reported himself practically well again, adding gratefully: "You have done me more good than all the other medical men I have been under."

Case No. 9081:—Constant Running of the Nose, Uncontrollable Sneezings, Sense of Suffocation, Swollen Eyelids, and Albumen in the Urine.

“ Dear Sir,—I read your book to-day, and have come to the conclusion that you will put me right. I am 29, married, and a grocer by trade. Up to 21 I did not know what it was to be ill, but, after that, always had a nose cold. Three winters ago I had influenza, and twelve months after had it again. About six months later I awoke one morning with a stifling feeling and sneezed badly, and both my eyelids swelled up. They went normal in about 24 hours without any treatment, but I had the swelling again and again. I consulted several doctors, who all found albumen in urine, but all said there was nothing to bother about. One cauterised my nose, an eye specialist gave me glasses for astigmatism, and another put me on sour milk for three months. I then went to a kidney specialist, who gave me a kidney belt, saying the left kidney was out of place about 3 inches, and I needed no medicine; the trouble would clear up in a month or so. I have worn the belt now six months; and, testing urine to-day, I found quite as much albumen as before. I also had my eyes swollen again on Thursday last. I shall be glad if you will reply, if you think you can put me right.—Faithfully yours, A. H.”

An interview was arranged, and the following further details elicited:—The patient was always very depressed, morbidly self-conscious, and his memory confused. He slept restlessly, and suffered from palpitation. His tongue was coated, his motions loose, watery, and contained mucus. He passed water rather frequently, particularly at night.

Disease, in this case, had affected practically all the mucous membranes in the patient's body, the organs most damaged being the nose, lungs, kidneys, and bowels. Though, as was to be expected, there were several relapses in the early stages of treatment (for details of which see pp. 38, 56, 59, 64, 65), the patient was usually able to report improvement in some particular, and no further interview was necessary. Attacks of sneezing and suffocation gradually became less frequent. He gained weight, lost his depression, felt better and stronger, and looked so much better as to attract the attention of his friends. About three months after starting treatment he wrote: “ I have gone along fine and feel better every way. My mind has improved wonderfully. I tested urine last Saturday and found no albumen.”

Case No. 9086:—Attacks of Very Difficult Breathing, Cough, Tough Phlegm, Insomnia, and Indigestion.

"Dear Sir,—I have obtained a copy of your book, and I think my case is something similar to the one you mention. I am a widower; occupation, grocer. I was laid up four years ago with chronic bronchitis and asthma. Have suffered from it more or less since, but it has been worse lately. I will have an attack of coughing accompanied by expectoration for an hour or so, during which my breathing becomes laboured and wheezing, and is affected for some time. After 5 or 6 in the afternoon I have to stay in and keep quiet, and sometimes have the greatest difficulty in getting upstairs to bed. Sometimes I don't get more than two hours' sleep in a night. Have been to a local doctor, but his treatment always gives me bad indigestion and makes me feel much worse in myself. I do not drink or smoke. Appetite fairly good, but have to avoid anything likely to give indigestion. I shall be pleased if you will treat me.—Yours sincerely, W. P. F."

Additional details were furnished in response to inquiries. The patient was 58. He had given way to pernicious habits in youth. His heart was now very feeble, and his circulation bad. He had been very subject to colds. He suffered from flatulence unless very sparing in his diet, and from a dry, scaly eruption on his skin.

Obviously the patient's lungs and heart were damaged, and there was danger that the next chill or other acute malady, slight in itself, might prove fatal. The skin trouble belonged to the obstinate variety known as psoriasis. A four-months' course (of the treatment indicated at pp. 42, 55, 59) was advised. As was to be expected, he did not, at first, make uninterrupted progress. But after a time marked improvement set in; and before the expiry of the course recommended he was able to announce: "I notice a very decided improvement in my health." At the same time he wrote that there had been no trace of asthma for weeks past, and attacks of difficult and distressing breathing had ceased entirely. And, in addition, the red patches on the skin had disappeared.

Case No. 5048:—Urethral Discharge, Pain on Passing Water, Marked Nervousness, and Debility.

"Dear Sir,—Some time ago I procured your book, but little thought I should so soon have need of the advice it contained. About two months back, I am sorry to say, I was infected, and noticed a burning sensation on passing

water. Then a discharge appeared. I had considerable pain for the first few days, which afterwards diminished, and the discharge became less, and finally ceased for a time. But it occasionally reappears, so to be on the safe side I am writing to ask you to send me the necessary medicine and directions. I am 25 years old, and manage my father's factory. I live very simply, don't drink much, and cannot plead guilty to sexual excess. Two years ago I had double orchitis, but, curiously enough, it was unaccompanied by discharge. I am rather irritable, but in other respects seem quite well. Thanking you in anticipation, etc."

A personal interview being out of the question, supplementary enquiries were addressed to the patient. In the light of his replies his first letter, as so often occurs, showed a distinct tendency to underestimate the importance of some of his symptoms. The following further details were elicited:—The patient's looks were haggard, and he confessed to extreme nervousness, increased sexual impulse, treacherous memory, sleep troubled with dreams, occasional frontal headaches, pains in the loins and lower bowel, and coldness of the extremities. Disease was evidently situated not only in the prostate gland, but also in the nervous and vascular systems. In fact, his malady, of which he made light in his first letter, had begun to take hold of his entire system, but the patient had luckily come under my treatment (see pp. 26, 45, 70, 71) in good time, and he began to improve almost immediately. The pains ceased in a few days, and the discharge stopped soon after for good. The nervous symptoms naturally took a little longer to disappear, but in about two months the patient could be declared perfectly cured. A year later he wrote to say that he was in the best of health, and that the course of treatment he had undergone had proved satisfactory in every respect.

Case No. 400:—Severe Rheumatic Pains in the Legs and Urinary Troubles, following Urethral Infection, with Shortness of Breath, Anæmia, and Debility.

"Dear Sir.—A friend lent me your book, and I have learned a great deal from it. I am a clerk, and fear losing my situation owing to my illness. I am now 22, and confess that, since my 13th year, I have been given to pernicious habits. Last year I contracted a urethral discharge, which was first treated privately and afterwards at a hospital. But I always felt I was not properly cured. Then I was infected again, and treated with injections of permanganate of

potash, but on these being stopped the discharge immediately reappeared. The disease now also spread to my legs, which were affected with severe rheumatic pains, and are so swollen that I recently had to stay in bed five weeks. I am at work again at present, but suffer agonising pain in the thigh, and limp about like an old man. I have taken a lot of salicylates, have had sulphur baths and other treatment, but nothing seems to do any good.

Thanks to your valuable book, I have learnt the gravity of other symptoms, which I had previously thought unimportant. I pass water very frequently, though little at a time, and I now have to rise once or twice at night; I have noticed, too, that the stream is forked. Other symptoms are: a slight pain in the right kidney region, small blisters on my chest, occasional nocturnal emissions, shortness of breath, weakness, thinness, and pallor.

Kindly send medicine and directions soon, and in the meantime I am forwarding you on account of your fees.—Yours, etc.”

This patient had evidently developed rheumatism as a complication of his original malady. That is to say, disease had spread to his blood and nervous system from the urinary passages, which were the site of the original troubles. This complication is peculiarly liable to arise after too forcible suppression of the discharge, and is not only very painful and distressing, but also exceedingly dangerous. It causes extreme prostration, often leads to permanent valvular heart disease, and not rarely ends fatally. Appropriate treatment (on the lines suggested at pp. 26, 29, 33, 71), which from beginning to end had to be carried on by letter, was begun at once. The discharge gradually lessened, and in 11 days had quite stopped, without the use of injections. Despite occasional setbacks, mainly due to bad weather, the patient made rapid progress, and in 10 weeks could write: “I feel I shall soon be quite well now, and am heartily grateful for your help.” His anticipations were soon completely fulfilled, for at the end of 13 weeks’ treatment he reported himself free from all his troublesome symptoms and feeling quite normal again.

Case No. 9218:—Discharge, Frequent, Painful Urination, and Cloudy Urine.

Mr. H. L——, a young hotel employé, had contracted a urethral malady accompanied by a discharge. After four months’ vigorous treatment, during which period he was prescribed various drugs for internal use, including *salol*,

urotropine, and *tincture of hyoscyamus*, while injections were ordered of *protargol*, *sulphocarbolate of zinc*, and *nitrate of silver* (caustic), the discharge was still persisting, and he came to me. He now had to pass water very frequently; doing so caused great pain, and the urine was very clouded.

The disease was situated in the urethra, and also I concluded, from additional information supplied to me, in the prostate gland, situated at the mouth of the bladder. It was liable to develop still further along the urinary passages, and scientific treatment was therefore applied without delay. The result of these gentle measures (given at pp. 70, 71) was most striking. The patient came under my treatment on the 21st of a certain month, and on the 31st of the same month he reported the complete cessation of the discharge two days previously. Eight days' scientific treatment had sufficed to bring about this remarkable improvement, although the patient never discontinued his occupation, which involved a great deal of standing. The other symptoms all disappeared a few days later. As a precautionary measure the patient remained under observation for several weeks. He never had the slightest relapse, and there could be no doubt that he was permanently cured.

Case No. 7282:—Great Difficulty and Pain in Passing Water, with Pain in the Back, Indigestion, Lassitude, Sleeplessness, and Palpitation, in a Man of 63.

"Dear Sir,—I earnestly implore your help in my trouble. I am now 63 years of age. Between 20 and 30 I gave way to bad habits, and later was infected with urethritis. This was treated with partial success at . . . Afterwards I tried to complete the cure with pills and home remedies, and when I left the town some improvement was apparent. After that I let things take their course, and now, for a long time past, I have suffered from difficult urination and occasional retention. A week ago I had to call in a surgeon, who twice passed catheters. Now I can pass water only drop by drop, and with intense burning pain. The urine is dark in colour, and deposits a sediment; and the parts are shrunken and quite powerless. There is trouble elsewhere too. My heart beats rapidly, my appetite is bad, I am troubled by flatulence, and my knees crack when going upstairs. Otherwise I am stout and look robust, and no one would think I was ill. Kindly forward directions and medicine without delay.—Yours, etc."

Supplementary questions elicited further important facts.

The patient had much difficulty in getting to sleep, and his rest was broken. He complained of great languor and weariness, and of lumbago. His hands and feet were cold. He had had a good deal of irritation in the back passage, while his bowels were irregular, and the motions hard.

There was no doubt that the patient's prostate gland was much damaged, all adjoining organs, in addition, being affected. There was also evidence of disease of the heart and blood-vessels. In view of his age, the condition was more serious than the patient realised. Treatment (on the lines laid down at pp. 42, 45, 70) was by post, as he resided abroad. Apart from the fluctuations inevitable when, as under my gentle methods, symptoms are not forcibly suppressed, he made good progress; and at the end of about seven weeks he wrote: "I can report that my condition is remarkably improved. I am much more cheerful. My weariness is practically gone. My heart now beats normally. My appetite is good, and my bowels regular. I can pass water far more easily, and it is now perfectly clear." He continued to advance steadily, and about two months later could also state that his sleep, which had been so bad, was now sound and refreshing.

* * The three preceding cases are only some of the many, many examples I could cite illustrating both how unnecessary and extremely dangerous drastic treatment is for maladies of this class. The urino-genital organs are the most delicate organs in the body, and, if damaged by ill-treatment, may not only cause life-long suffering to the victim, but, in addition, bring disaster on his innocent family. I am firmly convinced, from years of experience, that the injection of irritants and the introduction of instruments nearly always aggravate the original trouble, and are directly responsible for at least three-fourths of the serious complications.

Case' No. 751:—Piles, accompanied by Intense Pain, Bleeding, Discharge, and Great Prostration.

Mr. ———, a gentleman of middle age, who had previously been under my care for an internal complaint, consulted me by letter, his home being in the provinces. When younger he had had several slight attacks of piles, but they had never caused him more than temporary inconvenience. On this occasion, however, he was suffering from a much more severe bout. The pain in his lower bowel became so excruciating that he could scarcely move, profuse bleeding

and discharge set in, and the sufferer quickly became so ill that he was obliged to keep his bed and summon a doctor to his aid. The latter made an examination of the bowel and discovered a large mass of internal piles, much inflamed and bleeding freely. He prescribed treatment, which to some extent allayed the pain and loss of blood, but declared that no cure was possible except by operation. It was on this account that Mr. ——— sought my advice. Knowing that the operation in question is followed by a very painful and tedious convalescence, he was unwilling to submit, if it could be avoided.

The diagnosis was, of course, beyond question, the disease being located in the veins of the bowel. Neglect of piles is always dangerous since, from their situation, they are exposed to constant irritation, frequently entailing disastrous consequences. But from experience of many similar cases I was, fortunately, able to reassure the patient, by telling him that the malady almost invariably yields to systematic treatment, without the necessity for operative procedures. My forecast was entirely justified in this instance, for, after a few weeks of the extremely gentle treatment I prescribed (as indicated on p. 47), not a trace of the piles could be found. And this was confirmed by the very doctor who had said that nothing but operation could cure them. For the patient wrote as follows:—"Before writing I thought it better to have myself examined, so called on the doctor who had attended me at the acute stage. He told me, after examination, that the cluster of piles has quite disappeared and the bowel is perfectly normal."

I kept in constant touch with Mr. ——— for over a year after this cure, and no relapse occurred.

Case No. 9184:—Free Bleeding from the Bowel, with Pain, Constipation, Dyspepsia, and Nervousness.

"Dear Sir,—I have your book, and would like your opinion and advice on my case. I am a clerk, 27 years of age. I have suffered from hæmorrhoids for the past three years. I have been to several allopathic doctors, who have treated me by suppositories, ointments, and internal medicines, which gave temporary relief but did not succeed in curing the trouble. The piles project very painfully, with almost daily loss of blood at stool, sometimes a considerable quantity. I have at times indigestion, distension of lower part of stomach, chest pains, specks before the eyes, etc., with the usual accompaniment of constipation. . . . At

intervals I have had hæmorrhage from the piles when walking, quite suddenly, without any warning. I am very nervous and irritable, and rather thin, but not emaciated. Should you think it a suitable case for postal treatment I shall be glad.—Yours faithfully, F. W.”

Further questioned, the patient stated that he had a pale complexion and rather dim eyes surrounded by dark rings. He slept heavily, but woke unrefreshed, and his appetite was often poor.

In this case disease of the blood-vessels had caused the formation of piles, and the resultant bleeding had greatly impoverished the sufferer's blood, while his nervous system was also affected. Treatment was begun without delay, in accordance with the principles set forth on pp. 26, 47, and 48, and was throughout conducted by correspondence. Relapses were, of course, frequent at the outset, and, as often happens, the patient at times became somewhat disheartened. But he was encouraged to strive for ultimate success, and 11 weeks after coming under my care he wrote: “I am glad to be able to give a good report since your last letter. During the whole of this time (over three weeks) there has been no hæmorrhage. When at stool the bowel seems to project sometimes, but readily goes back, and gives no pain. I have had a more peaceful time than for many months, and am sincerely grateful for such a definite improvement.” With reasonable care there should be no danger of his trouble ever recurring.

Case No. 7699:—Anæmia, Loss of Strength, Headaches, Lumbago, Indigestion, and Constipation, following an Obstinately Persistent Discharge in a Woman Patient.

“Dear Sir,—By chance your book has come into my hands, and I am writing to ask if you can assist me. I am 20 years old and engaged to be married soon. At present I am in business, occupation sedentary. I am extremely anæmic, my eyes are dim and encircled by dark rings, and my hair falls out. My disposition is cheerful, but I suffer at times from severe headaches, just over the eyes. I sleep well, but am losing strength. My digestion is bad, bowels constipated, and motions occasionally painful, but no piles. And I also have a backache about the waist. Now I come to my chief trouble. Some time ago I had an unpleasant discharge, which lasted for nearly 18 months, and it is since then that I have been feeling and looking so wretchedly ill.—Yours truly, E. H.”

This young woman had had disease in the uterus and neighbouring organs, and, in addition, the blood, nervous system, and digestive organs were also affected. Treatment (as described on pp. 26, 37, 76) was entirely by correspondence, and she improved steadily. Four months after the beginning of the course she wrote as follows:—"I am very pleased indeed to be able to inform you that I now feel absolutely cured. My complexion is clear and bright, and the rings round my eyes are gone. I have a splendid appetite, and am in every respect quite well."

The patient was kept under observation some time longer, the object being to keep her, in view of her approaching marriage, in the most perfect health, and this was accomplished.

Case No. 3053:—Lassitude, Nervousness, Loss of Memory, Noises in the Ears, and Pains in the Head and Neck.

"Dear Sir,—I have had the good fortune to obtain your book, and I understand now how much my health is impaired. I have every confidence in you, and shall be glad if you can treat me by letter. I am a farmer, 30 years old, and unmarried, but intend to marry soon, should you be able to restore me. For a long time past I have felt very nervy and lifeless, and suffered from constant rushing noises in the ears. Lately I have also had a burning sensation in the head, and in the back along the spine, and I am in dread of spinal disease. I attribute these troubles to the bad habits to which I was addicted between the ages of 16 and 26. So far I have never asked a medical man to prescribe for me, and I put my entire trust in you. I am not very well-off, but you may rely on me settling your fee, and as a token of good faith I enclose on account. Kindly reply at once, as I am anxious to begin your treatment.—Yours, etc."

Replying to further questions, the patient mentioned a few other symptoms, including failure of memory, unrefreshing sleep, lumbago, and attacks of palpitation and shortness of breath.

The organs affected by disease were the brain, spinal cord, heart, and kidneys. Treatment (as set forth at pp. 26, 29, 42, 64) soon produced a slight improvement, though this was naturally followed by short setbacks. But at the end of two months the patient could report that his condition was distinctly better. He had lost the feeling of lassitude, pain in

the back was much diminished, and noises in the ears far less frequent. In view of his matrimonial plans he was recommended to persevere until thoroughly restored, and 16 weeks after coming under treatment he wrote: "I am practically cured now, but would like you to advise me for a few weeks longer, which, I feel certain, will make my recovery permanent. I look much better, and have gained weight. All my symptoms seem to have gone; even the buzzing in the ears, which has been so obstinate, now occurs only at very rare intervals, and sounds quite faint."

* * I cannot sufficiently emphasise the supreme importance of attaining good health to those who contemplate marriage, as this patient did. To assume the responsibilities of married life, handicapped by a chronic malady, is the most odious crime imaginable, for the malady may affect disastrously not only one's life-partner, but also one's children. No one should take this all-important step in life, without first making sure that his or her body has been thoroughly repaired of all damage that errors of living and other causes have inflicted.

Case No. 241:—Severe Neuralgic Pains, Eruption on the Skin, Extreme Debility, Lassitude, and Loss of Energy, following Drastic Treatment with Mercury for Alleged Syphilis.

"Dear Sir,—I have luckily come across your book to-day, and it has inspired me with renewed hope of recovery, if you will be so kind as to assist me. I am 29, a book-keeper in a commercial firm, and engaged to be married in about a year's time. As a boy I was given to vicious habits, but broke myself of them two years ago. I must also plead guilty to other indiscretions. Five years ago I had gonorrhoea, which was not properly cured till last year. Last July I was again infected, this time with syphilis. I was prescribed *vasinol mercurial*, and I had to rub this ointment in turn into each calf, each thigh, each arm, and the chest. I have been doing this regularly for some time, but, though the local sore has partially healed after treatment with iodoform, do not notice any improvement; on the contrary, I feel terribly debilitated. Though I get plenty of sleep, I wake with no life in me and all day long have no energy for my work. In addition, neuralgic pains in my arms interfere with writing, and I feel frozen even in only moderately cool weather. I used to go in for physical exercises, but had to give them up, owing to this weakness.

"I enclose on account of your fees*, and please let me have medicine and directions at once. I shall hardly know how to be grateful enough if you succeed in curing me.—Yours, etc."

From additional information given in a further letter, I gathered that the patient had an eruption on his skin, most marked on the thighs, head, and face.

Clearly not only the skin, but also his nervous system was affected, and a study of the patient's symptoms convinced me that the drastic application of mercury had injured him, probably more than the disease it was given to cure. When treated scientifically (as described at pp. 26, 30, 55), in less than six weeks the patient could report very substantial progress. His mental depression was gone, his sleep was refreshing, and appetite good, and at the end of four months he was entirely well. This cure was permanent. For three years later, when he consulted me again, for a different trouble, he introduced himself with these words: "A few years ago I had a severe attack of syphilis. I had already given up all hope of recovery, but was completely cured by your wonderful method, for which I shall be grateful for the rest of my life."

Case No. 4087:—Sore Mouth, Rashes on the Back, Anæmia and Depression, following Drastic Mercurial Treatment.

"Dear Sir,—Quite by accident I got hold of your book, and since reading it have regained courage. Previously I had lost confidence in all medical men, and regarded myself as incurable. About four years ago I noticed a chancre, which, after being canterised, healed in about 10 days. Two years later I had some trouble in the month, and was suspected of having had syphilis. Being in the army, I was compelled to submit to treatment with mercury, but did so only for a fortnight. For, having heard how dangerous mercury is, I evaded further applications. Since then I get mouth symptoms every few weeks, and also have a lot of spots on my back. My complexion is very pale and of a muddy consistency. My eyes are rather dim, and I am always terribly depressed.—Yours, etc."

In a subsequent letter the patient, a non-commissioned officer, further stated that he was engaged to be married.

* The advantage of remitting a fee on account (as a guarantee of good faith) lies in this, that treatment is begun with the least possible delay, an important consideration if the case is urgent, or when sufferers live at a distance, abroad or in one of the Colonies (whence I receive so many applications for professional assistance).

I formed the opinion that disease had affected the patient's blood, skin, and nervous system. On the other hand, he had probably never had syphilis, as was alleged, but had suffered from a non-specific sore. His present trouble was due, in the main, to the large quantity of mercury his system had absorbed. Under the simple treatment which I prescribed (as given at pp. 52, etc.) he rapidly improved; but the course was continued right up to his marriage, by which time his condition left nothing to be desired. Three months afterwards he wrote: "All has gone well. My present state is very good. I have no symptoms whatever, for which I have only you to thank."

Case No. 8684:—Irritability, Nervousness, Loss of Memory, Headaches and Indigestion, following Treatment with Mercury and "Salvarsan."

"Dear Sir,—I propose to go through a course of treatment under your guidance. I am 28 years old, employed in a merchant's office, and engaged to be married. About 4½ years ago I was infected with syphilis, though I cannot remember ever having skin-symptoms. I had two courses of mercurial treatment, but after two years, examination by the blood-test still gave a positive result. I accordingly had an injection of *salvarsan*, after which the blood-reaction became temporarily negative. For six months later it was again positive, and although I had a second injection it remained so. I cannot describe myself as seriously ill, only I often have bad nights, suffer from indigestion, am rather nervous and irritable, and my memory is uncertain. Please ask me any further questions that may be necessary, and let me know the amount of your fee. I rely upon you sending medicine packed in such a way that no one should suspect what it is for.—Yours, etc."

From the particulars received it was, at least, doubtful whether this patient had ever had syphilis at all. On the other hand, there could be no doubt whatever that the disease now present in his nervous system, digestive canal, and elsewhere, had all been brought on by the violent drugging to which he had been subjected, which had failed in its avowed object of changing the reaction of his blood, a diagnostical test of very problematical value. For here was a case which, according to this test, ought to have showed the usual secondary skin-symptoms at one time or other; but in the course for 4½ years never did so.

Without, therefore, giving undue weight to previous diagnoses, a course of treatment was instituted on the lines

laid down on pp. 26 and 37, with the happiest results. At the end of only seven weeks he was able to report that his health now left nothing to be desired. He slept much better, and had lost his former irritability. He added: "I am looking very well now, as friends who hadn't seen me for some time have remarked." He continued to improve, and at length, as he was quite free from symptoms and nearly five years had elapsed since the supposed infection, he was given permission to marry, with certain precautions.

Case No. 9123:—Infectious Skin Trouble, Inflamed Mucous Membranes, Swollen Glands, and Marked Wasting.

Mr. ———, aged 27, married, consulted me in the following circumstances. Some five or six months previously, he told me, he had had the misfortune to contract syphilis, through using an unclean utensil. In his terror he went first to a special hospital, where they wished to detain him; but to this he would not consent. The local manifestations were now very severe; further, he had a swelling of the glands (bubo) in the left groin, sore mouth, gums and throat, and abundant rashes on the back and arms. He was, naturally, very depressed, had lost in weight, had a muddy, unhealthy complexion, and looked very ill. And to add to his misfortunes, a few weeks later it became evident that his wife, aged 26, had also suffered infection. She had great soreness and irritation of the parts, ulcerated throat, a small bubo, and thickly-spread eruptions situated on the abdomen, groins, and arms, the first very marked. She complained of broken sleep, and was extremely pale and much wasted.

There could be no possible doubt about the diagnosis, their blood having become poisoned by the syphilitic virus. No time was lost, therefore, in applying suitable treatment (for which see p. 52), and in four or five months, to their great delight, every symptom had vanished in both patients. They, however, remained under observation for a year, to guard against relapses, and at the end of that time the husband had gained $1\frac{1}{2}$ stone, and the wife looked the picture of health. They were, in fact, completely cured.

* * * These cases (Nos. 841, 4087, 8684, and 9123) show how absolutely unnecessary drastic treatment usually is in this distressing malady which, under proper care, I consider is always curable. Drastic treatment with *mercury* (in the shape of pills, powders, ointments, subcutaneous injections) or with *arsenic* (in the shape of *salvarsan*) often wrecks the

patient's constitution for life, or may even lead to an immediate fatal issue. The misery due to such poisons given in the guise of medicine can hardly be exaggerated.

Case No. 490:—Feeble Heart's Action, Unrefreshing Sleep, Great Lassitude and Depression, Irritability, Disinclination for Work, Failing Appetite, and Constipation.

Mr. M——, head of a large commercial firm, came to me one day in a most alarming state. He was over 60, a stout man of typically apoplectic appearance. His face was blue and covered with dilated veins, his eyes bloodshot and puffy, his lips violet, and his skin everywhere lax and flabby. He stooped somewhat, and his walk had no spring in it. The action of his heart was weak and rapid, his pulse being 90 per minute and very feeble. He had no appetite, and suffered from constipation. He was moody, irritable and despondent, and always weary. He was tired even on waking in the morning; dragged himself to business nevertheless, but on arrival felt so unfit for work that, as he put it, he was "almost afraid to open his letters." His history showed that his life had been one of hard work and fairly free living. He had always been a big eater, till his appetite failed, and still took too much alcohol and smoked strong cigars.

Beyond all doubt the chief seat of disease in this case was in the heart and arteries. But, in addition, the patient's entire nervous system, bowels, liver, kidneys, and, in fact, all his organs were damaged to such an extent that, unless a great change could be effected, he had probably but a few months to live. Prompt measures (particulars of which may be found at pp. 26, 38, 39, 40, 42, 45, 64, etc.) were adopted to prevent death and to repair the injured organs; and within four or five months I had the pleasure of seeing my patient's mental state and bodily appearance gradually undergo a striking alteration. He became more cheerful and energetic, in his own words, "felt more like a man again," and could easily cope with his responsible work. His face acquired a clean and even colour, his eyes regained a normal aspect, his skin became firm and elastic, his heart with its steady beat seemed to be good for another twenty years, and his bowels acted naturally. So remarkable, indeed, was the change in his appearance, that the patient's local doctor, who attended the family for minor ailments, on one occasion laughingly said that my patient was beginning to look as young as his own children.

Unfortunately, this case had a tragic sequel. Encouraged by his great improvement, the patient grew slacker in obeying my directions. He also began to resume his former excessive indulgences in spirits and tobacco, and, in consequence, had several attacks of distressing giddiness, due, I have not the slightest doubt, to acute poisoning with alcohol and nicotine. Now, it so happened that my patient had as son-in-law a medical man, who, hostile to homœopathy, took advantage of one of these attacks in order to persuade his relative to go and see a well-known allopathic consultant, who promptly ordered *digitalis* and other drugs in drastic doses. I could do no more than warn Mr. M. against such treatment, but he would not listen. For the powerful action of the poisonous drugs had made him feel distinctly better. This went on for a week or two, and then the reaction set in, exactly as I had feared. In less than four months Mr. M. had lost all the benefit gained from my treatment. He had shrunk to a mere skeleton, and become so extremely ill that he determined again to place himself under my care. But before this design could be put into execution he suddenly collapsed, and died within a few hours, as I understood, from rupture of the main artery which springs from the heart.

Case No. 4341:—Rapid Heart's Action, Palpitation, Shortness of Breath, Difficulty in Sleeping, and Blotchy Complexion.

“Dear Sir,—I received your book a short while ago, and having in former years played havoc with my constitution, I am applying to you to advise me, so that I may escape the dreaded consequences in later life. I am a Government official, and my hours are very irregular. I sometimes have to start work at 6.30 a.m., and am often on till 10 at night. I am now 25, and though fairly strongly-built, suffer (according to the diagnosis of a medical man here) from an extremely nervous heart. My main symptoms are: rapid beating of the heart and difficulty in going to sleep; in consequence, I am tired and unrefreshed in the morning. At present my treatment consists merely of restrictions in diet; I have been advised to avoid all worry and emotion, and I am forbidden to smoke. I have also taken *bromides* for sleeplessness, *castoreum*, and some preparation of *iron*. Other symptoms are: a blotchy complexion, an unpleasant sensation in the head on waking, spots on the legs, shortness of breath on going upstairs, and attacks of palpitation.—Yours, etc.”

Obviously the patient's heart and blood-vessels were affected, and treatment, which was entirely by correspondence, was on the principles set out on pp. 42 and 45. Thanks to his youth, and to his faithful adherence to all directions, the patient made fairly quick progress. Within a few weeks sleep had improved, his complexion was clear, and the morning head troubles had vanished. But his heart was still beating too forcibly, and treatment was, therefore, continued some time longer. In the end, however, he was able to write: "I am now absolutely cured. My heart has been perfectly normal for a long time, even though I now drink beer and smoke. And it does not trouble me when I do the physical exercises you ordered. I can now walk long distances without any fatigue, and without experiencing the slightest palpitation."

Case No. 767:—Mental Backwardness, Peevishness, Irritability, Bad Sleep, Poor Appetite, and Muscular Twitchings, in a Child Infested with Threadworms.

N. N., a boy of 9, was brought to me by his mother. He was undersized, looking not more than 5, and very anæmic. His manner was depressed and nervous, and his muscles twitched violently, especially those of his head, arms, and shoulders. He was described as irritable, peevish, and very backward at school. He had great difficulty in getting to sleep, and his sleep was restless and broken. His appetite was bad and he disliked meat; he suffered from flatulence, and was often costive, with offensive motions. Born in the tropics, he had been constantly under treatment, and had taken a variety of drastic and poisonous drugs with little or no benefit. Threadworms had been observed in his motions from time to time.

Clearly the child's nervous and digestive systems were diseased. In fact, I was satisfied that he was a victim of that form of neurasthenia which, in children, is so often associated with threadworm-disease. Treatment was accordingly prescribed as indicated at p. 26, with the addition of a certain medicine, which I have found particularly efficacious in destroying and expelling these noxious parasites. Twelve days later his mother reported: "Your treatment checked those jerking movements at once. Each day it had a better effect, and I am surprised to note the number of threadworms he passed. The stomach, too, was regaining a healthier tone, as his motions were no longer dark-coloured

and offensive. They were yellower and not so constipated. His appetite, too, is surprisingly good, and he sleeps more soundly, and many more hours than before."

Case No. 933:—Indigestion, Constipation, Backache, Lassitude, Broken Sleep, and Sticky Discharge.

"Dear Sir,—After reading your book I feel I ought to do something to counteract the follies of my youth. I am 43 years old, and a wine merchant. As such, I travel a great deal, which to some extent is the reason why I have neglected my condition up to now. I was only 12 or 13 when noxious habits took hold of me, and kept me in their grip for 10 or 12 years. I ascribe to them the fact that I was almost completely bald at 24. Later I had a venereal discharge, which was treated more or less drastically by various medical men. I was married about 11 years ago, and have two children, who up to now seem fairly healthy. My present symptoms are: indigestion and acidity after food, a very languid feeling at times, and backache after train journeys. I am always constipated, and often note a slight discharge of a whitish, sticky character, particularly when at stool. I don't sleep badly as a rule, but sometimes I wake up during the night and for hours am absolutely unable to go off again. I also suffer from nervousness, especially when in company, and sometimes a feeling of apprehension comes over me. Kindly start my treatment at once, and please let me have your account for fees.—Yours, etc."

Summing up all the symptoms, I came to the conclusion that the patient's brain, spinal cord, stomach, bowels, and prostate gland were affected, and accordingly ordered treatment as shown on pp. 26, 29, 37, 38, and 70. The effect was highly satisfactory, for within three weeks my patient announced that he felt less languid, and that the sticky discharge was much less in evidence. And nine weeks after commencing the course he could report himself cured, as the following extracts show:—"I am feeling extremely well. I am free from backaches, my head is clear, and I have no feeling of apprehension. My spirits have returned, so that I now like to be in company, and am no longer nervous. My bowels act normally, and there is no trace of a sticky discharge. I don't feel tired on walking, my appetite is perceptibly improved, and my sleep leaves nothing to be desired. I have regained my rubicund complexion, the dark patches under my eyes having disappeared, and all my friends compliment me on my healthy appearance."

Case No. 187:—Lack of Vigour, with Disturbed Sleep, Pallor, Depression, Palpitation, and Headache.

“ Dear Sir,—I have read your book, and trust that you will be able to give me advice. I am a hotel proprietor by trade, 40 years old, married, and have four children. I was never particularly robust, and believe my constitution must have been weakened by vicious habits contracted as a youth. Moreover, I have drunk a good deal, chiefly beer, and smoked fairly heavily. My heart is very bad, especially on waking in the morning, when I feel tired and good-for-nothing. I am always extremely depressed, and when asleep dream a great deal. My complexion is pallid, with dark rings round the eyes, and I suffer frequently from palpitation and shortness of breath. But my principal trouble is loss of virility. At the critical moment I am overwhelmed with nervousness, and my vigour instantly vanishes.—Yours, etc.”

In this instance disease was situated in the spinal cord, involving the special centre which controls the function referred to, while the accompanying symptoms indicated that the brain was also affected. The lines on which treatment was arranged are described on pp. 26, 29, and 74. The result was very striking. There was a speedy improvement in the trouble which had given the patient so much distress. The associated symptoms also vanished, and in less than two months, to his great delight, he could report himself cured.

Case No. 8029:—Irritability and Mental Exhaustion, General Debility, Difficult Breathing, Much Phlegm, Pain and Fluttering at the Heart.

“ Dear Sir,—I have read your book, and wish to describe my present condition to you as shortly as possible. I am an innkeeper, 50 years old. I have been married 18 years, and my children are healthy. As a boy of 15 I gave way to vicious habits, but until 5 years ago never noticed any evil consequences. I seemed to possess a constitution of cast-iron till I was suddenly struck down with inflammation of the kidneys, and since then I have never recovered. I am fearfully irritable and excitable. The least worry causes my abdomen to swell up, and I have terrible pains at the heart, and flutterings which give me the impression that my heart is coming to a standstill. My breathing is very difficult, my chest always seems full of phlegm, and my head swims. I have neither courage, energy, memory, nor appetite, and feel like an old woman of 90. For the last 4 or 5 months I have lost all manly vigour, and there is a burning sensa-

tion in the back passage. Mental work of any kind, such as reading or writing, fatigues me very quickly. I have worked very hard, drunk and smoked fairly heavily, and been indiscreet in other directions, but never had any venereal complaint. Two years ago I suddenly lost the sight of one eye. But worst of all are my nerves, which for the last six months have been so bad that I have had to remain, almost constantly, in bed or on a couch.—Yours, etc.”

In reply to subsequent inquiries the patient stated that he was thin, feeble, and anæmic, and that he had great difficulty in getting to sleep. He also complained of noises in the ears, pain in the loins, and occasional palpitation, his pulse being 90 to 95 a minute.

Disease had affected the patient's kidneys, heart, blood-vessels, genital organs, and nervous system, and there could be no doubt that he was seriously ill. The effect of treatment (described on pp. 26, 29, 42, 64, 70) was, nevertheless, most satisfactory. Within three weeks he reported that he “felt much easier, had gained more interest in life, and had a better appetite”; and a little later that “he was much stronger and his face of a better colour.” At the end of two months he declared he could walk for hours without feeling more than slightly tired after such exertion. Soon after this he announced distinct improvement in the condition of his genital organs. And 4½ months after starting treatment he had gained 40 lbs. in weight, and his breathing was now quite easy.

A case of this kind requires, of course, two or three years before a complete and permanent cure can be achieved; but in the end this patient should be able to attain an advanced age in reasonable comfort and vigour.

Case No. 681:—Jaundiced Complexion, Great Nervous Depression, Loss of Energy, Bad Appetite, Shortness of Breath, and Piles.

Mr. ———, aged 55, single, a director of companies, felt and looked very ill when he first consulted me. He had lived for many years in the tropical climate of the Far East, and had indulged rather freely in alcoholic beverages. When younger, he had contracted syphilis and been vigorously treated with *mercury*. He had suffered for years from varicose veins, and had undergone an operation for phlebitis (inflammation of veins). His skin was of a dirty yellowish hue, he had large pouches under his eyes, and his eyelids

were inflamed. He complained chiefly of intense depression, nervousness, lack of self-confidence when in company, failing appetite, and utter loss of energy. His sleep was variable, but he was always tired on waking in the morning, and could not eat his breakfast. He was very liable to colds, suffered from distressing asthma-like attacks of shortness of breath, accompanied by wheezing, and had a great deal of phlegm every morning. He was troubled by piles, and he had recently noticed a diminution of virility. On examination his heart was found to be very weak, while his urine showed a high specific gravity (1035) and was extremely acid.

Climate and errors of living had seriously damaged this patient's organs, and, in my opinion, brain, spinal cord, heart, blood-vessels, liver, and kidneys were affected. His condition was most precarious; but he was an obedient patient and, from the first, improved very rapidly under systematic treatment (the outlines of which are given on pp. 26, 29, 42, 45, 64). He quickly became very cheerful indeed, and, waking quite refreshed, he enjoyed his breakfast more than any other meal, instead of refusing it. He was conscious of renewed energy for both work and play. Within four weeks, friends who had no idea he was under treatment began to compliment him on his improved appearance; and, whereas he had formerly been a rather indifferent golfer, his game was now much improved, owing to the increased steadiness of his nerves. After two months' treatment his colour was normal, his eyelids had become healthy, and the bags beneath his eyes were fast disappearing. His heart had a stronger and steadier beat, and he was gaining weight. Breathing was no longer difficult or wheezing, and the phlegm had ceased to give trouble. The piles were no more felt, and a cold he caught about this time left him with surprising rapidity; after that he appeared to be quite proof against colds, and when he discontinued treatment his chances of life had probably increased by not less than 20 years. A few months later he married.

I now close this little book, which I trust has repaid the attention you have bestowed on it. Its earlier sections have shown you how your disease may be identified, warned you against dangerous drugs and measures, and given you an outline of the scientific treatment that should be applied. And amongst the cases I have recounted at the end you

should be able to find one bearing some resemblance to your own, that will convince you that you also are curable.

To do more in the pages of a book, however bulky, is impossible. For no two cases, even of the same chronic complaint, ever run on exactly parallel lines. The symptoms and their sequence must vary, even as the subjects differ in important particulars. Age, sex, constitution, family and personal history, occupation and circumstances, may all powerfully modify the characteristics of chronic maladies. It is on this account that scientific medicine will never be governed by mere "rule of thumb," and the more clearly you recognise this, the more you will value the advice of the scientific medical man, who possesses the experience, skill, and resource that you have had no opportunity of acquiring.

The more thoroughly you realise how intricate the mechanism of your body is, and how delicate its adjustments, the less readily you will venture to tamper with it when out of order, or entrust its repair to any but the most expert hands. You will shrink from dosing yourself with patent nostrums, knowing that the poisons most of them contain will ultimately add to your troubles. You will see the utter folly of the claim that either physical exercise, or hydrotherapy, or massage, or electricity, or some patent food *alone*, is capable of banishing every malady in every subject. You will shun routine treatment with poisonous pills, powders, and mixtures, or with drastic injections, serums, and vaccines. Finally, you will give a wide berth to the operating-table till you are absolutely certain no other treatment can succeed.

Rejecting everything that is dangerous or useless, you will seek the scientific physician, who, after a careful study of your case, adapts treatment to your individual needs; and while scrupulously avoiding anything that could possibly harm you, avails himself of a wise combination of curative agents, drawn comprehensively from every system of medical treatment, past or present. Drugs in minute doses, where drugs are needed, baths, spongiugs, compresses, massage, inhalations, ointments, liniments, all these and more must be pressed into service; while diet, work, rest, exercise, sleep, amusements, and every detail of your life should be regulated, without pedantry and with due regard to your age, condition, occupation, and circumstances.

And if you loyally fall in with such scientific treatment, the thorough restoration of all the functions of your body, which alone merits the name of a cure, becomes practically a certainty.

POSTSCRIPTUM.

The author will be pleased to advise you, if you desire to consult him, and will give his personal attention to every case which he accepts for treatment.

If you are in London, or within reasonable distance, make an appointment for a personal interview. Fresh cases are seen between 2 and 5 daily, but if these hours are inconvenient, state your wishes as to time, and they will be met as far as possible.

If too far away to call, write at once and give a full description of your case. Search your past, and try to recall the many errors in your mode of life which (as I have shown) have probably contributed to produce your present malady. Always give, in addition, the following particulars:—(1) Your age; (2) your sex and occupation; (3) first beginnings of your trouble; (4) previous treatment, if any; (5) your present symptoms. Do not be deterred by distance. Very many chronic maladies can be treated by correspondence with entire success; and, as my records show, I have cured in this way many sufferers, not only in the provinces, but in France, Germany, Austria, Switzerland, Italy, Russia, in India, the Colonies, in fact, all parts of the inhabited world.

Please address *all* communications to:—

**Dr. Maurice Ernst,
53, Bedford Square,
London, W.C.**

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